

Handwritten: Hollins, Lester E. Jr.

Handwritten: JLB

Page: 41

Catch No. (s): _____

Arrestment Date: _____

Bond: _____

Defendant: Hollins, Lester E. Jr.

Address: _____

SS#: _____ SL: _____

Phone #: _____

Employer: _____

Phone # of Employer: _____

Supervisor: _____ Verified: _____

Charges: DUI 1st, No DL, No Ins

Affiant: Brad Sullivan Date Subpoenaed: _____

Other Witnesses: _____

Bonding Companies: _____

App. Date: 04/28/15 @ 1:00 p.m.

Hearing Date: 08/27/15 @ 1:00 p.m.

Continued to _____ for _____

Continued to _____ for _____

Continued to _____ for _____

Attorney: _____

Notes: _____

EXHIBIT

"PP"

MADISON COUNTY JUSTICE COURT

CASE RECORD OF STATE VERSUS HOLLINS LESTER E JR

CASE: MSO00-120608 CHARGE IMPROPER/NO DRIVER LIC

COURT DATE: 8/27/2015

HOLLINS LESTER E JR

AFFIANT/WITNESS: SULLIVAN BRAD DEPUTY

ATTORNEY FOR DEF:

BOND:

JAIL RCPT#

APPEAL BOND:

=====

O R D E R

DEFENDANT IS FOUND: NOLLE PROSEQUI

SENTENCE:

MOTION BY STATE TO NOLLE PROSEQUI

SO ORDERED, THIS THE 27th DAY OF August, 2015.

DOC. 4628

PAGE 180

BY:

Brian Murphy
JUSTICE COURT JUDGE

CASE: MSO00120608 VIOLATION DATE: 3/11/2015 DATE CLOSED: 8/27/2015

MADISON COUNTY JUSTICE COURT

CASE RECORD OF STATE VERSUS HOLLINS LESTER E

CASE: MS000-13799 CHARGE DUI

COURT DATE: 8/27/2015

HOLLINS LESTER E

AFFIANT/WITNESS: SULLIVAN BRAD DEPUTY

ATTORNEY FOR DEF: Defendant waived rights to attorney

BOND: 1,950.00 ESCO

JAIL RCPT#

APPEAL BOND:

=====

O R D E R

DEFENDANT IS FOUND: GUILTY PLEA

SENTENCE:

48HRS SUSPENDED. ORDERED TO ATTEND MASEP. NO DRIVING WHILE LICENSES ARE
UNDER SUSPENSION

FINE \$ 300.00 COSTS \$ 315.50 TOTAL \$ 615.50

SO ORDERED, THIS THE 27th DAY OF August, 2015

DOC. 4628

PAGE 178

BY:

Brian M. Sullivan
JUSTICE COURT JUDGE

CASE: MS000013799 VIOLATION DATE: 3/11/2015 DATE CLOSED:

MADISON COUNTY JUSTICE COURT

CASE RECORD OF STATE VERSUS HOLLINS LESTER E JR

CASE: MS000-120609 CHARGE NO PROOF LIABILITY INSURANCE

COURT DATE: 8/27/2015

HOLLINS LESTER E JR

AFFIANT/WITNESS: SULLIVAN BRAD DEPUTY

ATTORNEY FOR DEF:

BOND:

JAIL RCPT#

APPEAL BOND:

=====

O R D E R

DEFENDANT IS FOUND: GUILTY PLEA

SENTENCE:

DEF PROVIDED PROOF OF INSURANCE AFTER THE STOP

FINE \$ 100.00 COSTS \$ 132.50 TOTAL \$ 232.50

SO ORDERED, THIS THE 27th DAY OF August, 2015

DOC. 4628

PAGE 179

BY:

Brian M. Muffey
JUSTICE COURT JUDGE

CASE: MS000120609 VIOLATION DATE: 3/11/2015 DATE CLOSED:

CONFIDENTIAL PER 41 USC 2014
OF THE DISTRICT COURT OF CLARK COUNTY

You have been convicted of a first offense of violating subsection (1) of Mississippi Code 41-11-21 and are required to attend and complete MASEP. Mississippi license reinstatement on a 1st offense DUI is not possible without MASEP completion. The next enroll in session one you attend all four sessions in sequence. Be sure to present this court order at your first class.

TIME: 8:00 P.M. - 9:30 P.M.
TUESDAY NIGHTS

NAME COLLINS, LESTER E.
ADDRESS 110 FINE KNOLL RD 1-3
ELIZABETH MS 38620000

PLACE: HILSON CO. JUV. JOB CENTER
152 WATKINS PARKWAY, DE.
CARROLL, MS 39008

DRIVER'S
LICENSE 20067800

INFORMATION: 1-800-878-2515.

or (662) 322-3623 between DATE OF
\$ 500 - \$ 500 Monday - Friday BIRTH

FEE: \$150 Check or money order payable to MASEP must be paid at Session 1

Check card & fill in fee, if available
E 1 (a) alcohol, no bid. E 2 (a) other trip
E 3 (a) controlled substances
E 4 (a) legal age, new, 1/20, 1/20
E 5 (a) legal age, new, 1/20, 1/20
E 6 (a) legal age, new, 1/20, 1/20

2015 Class 1	SESSION 1 Jan 10	SESSION 2 Jan 17	SESSION 3 Jan 24	SESSION 4 Jan 31
2015 Class 2	FEB 10	FEB 17	FEB 24	MAR 03
2015 Class 3	MAR 10	MAR 17	MAR 24	MAR 31
2015 Class 4	APR 10	APR 17	APR 24	MAY 01
2015 Class 5	MAY 10	MAY 17	MAY 24	JUN 01
2015 Class 6	JUN 10	JUN 17	JUN 24	JUL 01
2015 Class 7	JUL 10	JUL 17	AUG 01	AUG 15
2015 Class 8	AUG 10	AUG 17	SEP 01	SEP 15
2015 Class 9	SEP 10	SEP 17	OCT 01	OCT 15
2015 Class 10	OCT 10	OCT 17	NOV 01	DEC 01

MASEP RULES:

1. Do not consume any alcohol or other drugs prior to attending class.
2. You must be at class for each session.
3. Do not bring guests.
4. No disruptive classroom behavior.
5. You must adhere to all program rules and policies.

PLACE: HILSON CO. JUV. JOB CENTER

DATE: 05/09/18, 10:00 AM

CLERK: JUDITH L. GIBBS

CLERK: JUDITH L. GIBBS

PLACE: JUDITH L. GIBBS

DATE: 05/09/18, 10:00 AM
CLERK: JUDITH L. GIBBS

IN THE JUSTICE COURT OF MADISON COUNTY, MISSISSIPPI

STATE OF MISSISSIPPI
VERSUS
HOLLINS LESTER E

CAUSE NO. MSC00013799

WAIVER OF RIGHTS AND ENTRY OF GUILTY PLEA

I, the undersigned defendant, desire to plead guilty to the charge(s) of DUI

I understand that by pleading guilty to these charges I will be found guilty and sentenced by the Court. The sentence may include a fine, restitution, court costs and/or imprisonment in jail.

I further understand that by entering this plea I am giving up certain rights.

I am giving up the right to a trial, to confront and cross-examine witnesses against me and to call and/or subpoena witnesses against me.

I am giving up the right to have a lawyer; I understand that if I cannot afford a lawyer, one may be appointed to represent me.

I am giving up the right to have the State prove the charges against me beyond a reasonable doubt.

I am giving up the right to a jury trial.

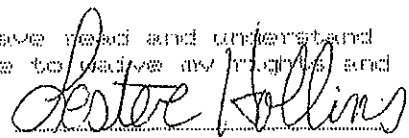
I further understand that if I am convicted of another crime, my guilty plea in this case could cause me to get a more severe penalty for that later crime.

I am giving up my right to object to the form and/or content of any testimony and evidence the State may introduce against me at a trial.

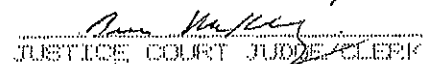
I understand that, if there was a trial, I would be allowed to testify, but I would not have to. If I didn't testify it could not be used against me.

I hereby certify under oath that there have been no threats or promises made to me in order to get me to enter this plea.

I further certify under oath that I have read and understand all the of the above and that I desire to waive my rights and enter a plea of guilty.



SWORN to and subscribed before me this, the 27th day of Aug


JUSTICE COURT JUDGE/CLERK

The Court finds that the defendant knowingly and intelligently and not under duress, waived his rights and entered a plea of guilty.

BRUCE MCKINLEY
JUSTICE COURT JUDGE

IMPORTANT - IDENTIFICATION CARDFOLD TOP AND BOTTOM OF ON PERFORATION STATE FARM[®] FOLD AND BOTTOM OF CARD ON PERFORATION**MISSISSIPPI
INSURANCE CARD**

INSURED HOLLINS, LESTER MUTL VOL
 POLICY NUMBER 250 0782-C12-24 EFFECTIVE
 YR 2011 MAKE CHEVROLET MAR 12 2015 TO SEP 12 2015
 MODEL MALIBU VIN 1G1ZC5EUXBF100896
 AGENT KEN JONES 1338-AA0
 PHONE (601)853-9600 NAIC 25178
 A BODILY INJURY/PROPERTY DAMAGE LIABILITY
 D 500 DEDUCT COMPREHENSIVE
 G 500 DEDUCT COLLISION
 H, R1

SEE REVERSE SIDE FOR ADDITIONAL COVERAGE INFORMATION

**MISSISSIPPI
INSURANCE CARD**

INSURED HOLLINS, LESTER MUTL VOL
 POLICY NUMBER 250 0782-C12-24 EFFECTIVE
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 G 500 DEDUCT COLLISION
 H, R1

SEE REVERSE SIDE FOR ADDITIONAL COVERAGE INFORMATION

KEEP A CARD IN YOUR CAR
 THIS CARD IS INVALID IF THE POLICY FOR WHICH IT WAS ISSUED LAPSES OR IS TERMINATED.
 KEEP YOUR CURRENT CARD UNTIL THE EFFECTIVE DATE OF THIS CARD.

0031002218

143609 1 04 24 2017 101jcmwllh3

M 53965-
AI App

Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: HOLLINS LESTER E
110 PINE KNOLL DR 143
RIDGELAND MS 39157

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI Date: 4/29/2015
vs: Cause No: MSO 00-013799
HOLLINS LESTER E
RE: DUI

This is to notify you that the above styled case has been set for
SET FOR HEARING on the 27th day of August A. D. 2015
at 1:00 PM. Your attendance is required.
BRUCE MCKINLEY presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

Shelia Taylor, DC DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS OR DEBIT CARDS OR ATM CARDS

202

Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: DEPUTY BRAD SULLIVAN
2941 S LIBERTY
CANTON MW 39046

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI Date: 4/29/2015
vs: Cause No: MSO 00-013799
HOLLINS LESTER E
RE: DUI

This is to notify you that the above styled case has been set for
SET FOR HEARING on the 27th day of August A. D. 2015
at 1:00 PM. Your attendance is required.
BRUCE MCKINLEY presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

Shelia Taylor, DC DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS OR DEBIT CARDS OR ATM CARDS

Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

TO: HOLLINS LESTER E JR
110 PINE KNOLL DR APT 143
RIDGELAND MS 39157

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 4/29/2015

vs:

Cause No: MSO 00-120608

HOLLINS LESTER E JR

RE: IMPROPER/NO DRIVER LIC

This is to notify you that the above styled case has been set for
SET FOR HEARING on the 27th day of August A. D. 2015
at 1:00 PM. Your attendance is required.
BRUCE MCKINLEY presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

Shelia Taylor, DC

DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS OR DEBIT CARDS OR ATM CARDS



Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

TO: DEPUTY BRAD SULLIVAN
2941 S LIBERTY
CANTON MS 39046

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI Date: 4/29/2015
vs: Cause No: MSO 00-120608
HOLLINS LESTER E JR
RE: IMPROPER/NO DRIVER LIC

This is to notify you that the above styled case has been set for
SET FOR HEARING on the 27th day of August A. D. 2015
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BRUCE MCKINLEY presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

Shelia Taylor, DC DC

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Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: HOLLINS LESTER E JR
110 PINE KNOLL DR APT 143
RIDGELAND MS 39157

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI Date: 4/29/2015
vs: Cause No: MSO 00-120609
HOLLINS LESTER E JR
RE: NO PROOF LIABILITY INSURANCE

This is to notify you that the above styled case has been set for
SET FOR HEARING on the 27th day of August A. D. 2015
at 1:00 PM. Your attendance is required.
BRUCE MCKINLEY presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

Shelia Taylor, DC DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS OR DEBIT CARDS OR ATM CARDS

Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

TO: DEPUTY BRAD SULLIVAN
2941 S LIBERTY
CANTON MW 39046

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI Date: 4/29/2015
vs: Cause No: MSO 00-120609
HOLLINS LESTER E JR
RE: NO PROOF LIABILITY INSURANCE

This is to notify you that the above styled case has been set for
SET FOR HEARING on the 27th day of August A. D. 2015
at 1:00 PM. Your attendance is required.
BRUCE MCKINLEY presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

Shelia Taylor, DC DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
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Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: HOLLINS LESTER E
110 PINE KNOLL DR 143
RIDGELAND MS 39157

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 3/19/2015

vs:

Cause No: MSO 00-013799

HOLLINS LESTER E

RE: DUI

This is to notify you that the above styled case has been set for
INITIAL APPEARANCE on the 28th day of April A. D. 2015
at 1:00 PM. Your attendance is required.
BRUCE MCKINLEY presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

Shelia Taylor, DC

DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS OR DEBIT CARDS OR ATM CARDS

Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: HOLLINS LESTER E JR
110 PINE KNOLL DR APT 143
RIDGELAND MS 39157

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 3/19/2015

vs:

Cause No: MSO 00-120608

HOLLINS LESTER E JR

RE: IMPROPER/NO DRIVER LIC

This is to notify you that the above styled case has been set for
INITIAL APPEARANCE on the 28th day of April A. D. 2015
at 1:00 PM. Your attendance is required.
BRUCE MCKINLEY presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

Shelia Taylor, DC

DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS OR DEBIT CARDS OR ATM CARDS

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS OR DEBIT CARDS OR ATM CARDS

02

APPEARANCE BOND

Ida M. Simmons
 License Number: 7805375
 339 Martin Luther King Dr.
 Canton, MS 39046
 601-859-1500

Amaya Clark
 License Number: 545
 155 Harrington Drive
 Canton, MS 39046
 601-624-9002

IN THE Justice COURT, STATE OF MISSISSIPPI

STATE OF MISSISSIPPI

VS MS

COUNTY OF Madison

Know All Men By These Presents:

That we, hester Hollis AS Principal and IDA SIMMONS, DBA ESCO'S BONDING COMPANY, a Surety (Identified by attached Power of Attorney No. 09183) are held and firmly bound unto the Justice In the sum of \$ 1950
 (Court, City, County, or State)

for the payment whereof well and truly to be made we bind ourselves, our heirs, executors, administrators, successor and assigns, jointly and severally firmly by these presents.

Signed and sealed the 12th day of March A.D. 20 15.

The condition of this obligation is such that if the said hester Hollis, Principal, shall appear at the next regular or special term of the Justice
 (Name)

Court Canton, MS to be held in and for said County to answer
 (Location)

charge of OUI 2st, No DL, No Insurance
 and shall appear from day to day and term to term of said Court and not depart the same without leave then this obligation to be void, else to remain in full force and virtue.

Taken before and approve by me:

X hester Hollis (L.S.)
 ESCO'S BONDING COMPANY

By: _____

Amaya Clark (L.S.)

THIS BOND NOT VALID UNLESS ACCOMPANIED BY AN INDIVIDUALLY NUMBERED POWER OF ATTORNEY PROPERLY EXEXECUTED.

NOTE: This is an Appearance Bond and cannot be construed as a guarantee for failure to provide payment, back alimony payments, Fines, Wage Law Claims, nor can it be used as a Bond on Appeal.

BAIL ONLY
POWER AMOUNT
\$5,500.00

ES 09183

ESCO'S BONDING COMPANY
274 W. PEACE STREET • CANTON, MISSISSIPPI 39046

KNOW ALL MEN BY THESE PRESENTS: that Ida M. Simmons d/b/a Esco's Bonding Company, a professional bondsman, as licensed by the Commissioner of Insurance of Mississippi, License Number 7805375, does constitute and appoint, and by these presents does make, constitute and appoint below named agent its true and lawful Attorney-In-Fact for it and in its name, place and stead, to execute, seal and deliver for and on its behalf and as its act and deed, as surety, a bail bond only. Authority of such Attorney-In-Fact is limited to appearance bonds and cannot be construed to guarantee defendant's future lawful conduct, adherence to travel limitation, fines, restitution, payments or penalties, or any other condition imposed by a court not specifically related to court appearance. This Power of Attorney is for use with Bail Bonds only. Not valid if used in connection with Federal Immigration Bonds. This power void if altered or erased, void if used with other powers of this company or in combination with powers from any other surety company, void if used to furnish bail in excess of the stated face amount of this power, and can only be used once. The obligation of the company shall not exceed the sum of

FIVE THOUSAND FIVE HUNDRED (\$5,500.00) DOLLARS

AND PROVIDED THIS Power of Attorney is filed with the bond and retained as a part of the court records. The said Attorney-In-Fact is hereby authorized to insert in this Power of Attorney the name of the person on whose behalf this bond was given. IN WITNESS WHEREOF, Ida M. Simmons has caused these presents to be signed by its duly authorized officer, proper for the purpose and its

seal to be hereunto affixed this 12th day of March, 2015

Bond Amount \$ 1,950 Appearance Date _____

Defendant hester Hollins

Date of Birth _____

Court Justice City Canton

Offense DOJ 754, NO DL, No Insurance

Executing Agent Amanda Esco

ESCO'S BONDING COMPANY



IDA M. SIMMONS, Professional Bondsman

MISSISSIPPI DEPARTMENT OF PUBLIC SAFETY

OPERATOR MUST READ THE FOLLOWING TO THE SUBJECT:

"Mr. (Mrs. or Ms.) HOLLINS you have the right to refuse the Intoxilyzer test which is being offered to determine your breath alcohol content. Should you elect to refuse, your driver's license and/or driving privilege to operate a motor vehicle upon the public streets and highways of this state shall be suspended for ninety (90) days if it is the first offense, or for one (1) year if you have been previously convicted of a violation of Section 63-11-30, Mississippi Code of 1972."

WARNING GIVEN: Y

Time of Observation Start: 23:30 Test Date: 03/11/2015 Start Test Time: 23:54

Intoxilyzer - Alcohol Analyzer Model 8000 DPS#: 36987 SN: 80-000600
 Instrument Location: MADISON SO MOBILE 2 Location Number: 219
 Standard Lot #: AG429701 Standard Expiration: 10/24/2016

Sub Name: HOLLINS, LESTER, EARL
 Address: 110 PINE KNOLL DR 143
 City: RIDGELAND State: MS Zip Code: 39157
 Sub DOB: Sub Sex: M
 Driver License Number: 800678605 SSN:

Operator's Name: SULLIVAN, BRADLEY, G

Test	BrAC (g/210L)	Time
Air Blank	0.000	23:57
Diagnostics	OK	23:57
Air Blank	0.000	23:57
Cal Check	0.082	23:58
Air Blank	0.000	23:58
Subject Test	0.118	23:59
Air Blank	0.000	23:59
Air Blank	0.000	00:00
Subject Test	0.116	00:01
Air Blank	0.000	00:01
Cal Check	0.082	00:02
Air Blank	0.000	00:02
Diagnostics	OK	00:02



BrAC g/210L
 HOLLINS 0.11

Calibration of instrument certified to meet acceptable standards of accuracy. This certificate approved by the Mississippi State Crime Laboratory pursuant to Implied Consent Act, Sec. 63-11-19, Mississippi Code of 1972, Annotated.

OPERATOR MUST READ THE FOLLOWING TO THE SUBJECT:

"You have the right to make a telephone call for legal or medical assistance after being booked."

Driver: Y Accident: N Violation: Y
 Enforcement Agency: MADISON SO
 County and City where violation occurred: MADISON , RIDGELAND
 Judge / Clerk: JUSTICE MADISON JUSTICE COURT
 Address: 2961 S LIBERTY ST
 Committed to: MADISON

Operator's Signature: [Signature] Citation/Ticket No: 013799
 SULLIVAN, BRADLEY, G

Approved by: Mississippi Crime Laboratory & Commissioner of Public Safety

COURT COPY

DPS/IP-01E (02/07)

PLEASE PRINT INFORMATION IN THE DESIGNATED BELOW. THE AFFIANT HEREIN, BEING DULY SWORN, UPON OATH DOES DEPOSE AND SAY AT THE FOLLOWING LOCATION, TIME, & DATE:				AGENCY CODE 0045	TICKET NUMBER 013799
LOCATION PINE KNOLL				HIGHWAY/STREET 2000	
DAY WED	DATE 03/11/2015	TIME OF STOP 23:25	TIME OF TEST 23:54		
NAME (LAST, FIRST, MIDDLE) HOLLINS, LESTER, EARL					
ADDRESS 110 PINE KNOLL DR 143					
CITY RIDGELAND				STATE MS	ZIP CODE 39157
DRIVER LICENSE NUMBER 800678605		STATE MS	BIRTH DATE		SEX M
SOCIAL SECURITY		EXPIRATION 02/28/2015		WEIGHT 180	
HEIGHT 6-00	CDL LICENSE N	CLASS R	RESTRICTIONS		ENDORSEMENTS
VEHICLE LICENSE NUMBER MDP531		STATE MS	YEAR 2010	MAKE CHEVY	MODEL MALIBU
					VEHICLE TYPE PASSENGER

MARION JUSTICE COURT

ADDRESS 2961 S LIBERTY ST

CITY CANTON

STATE OF MISSISSIPPI - DEPARTMENT OF PUBLIC SAFETY
 Receipt for Driver License and Temporary Driving Permit
 .02 or Greater BrAC

Was driver operating a commercial vehicle that required a
 class A, B, or C CDL at time of arrest?
 N

Was driver transporting hazardous material at time of arrest?
 N

BrAC

0.11

This form is valid as a driver permit for a period of thirty (30) days from the date it was issued. Anyone using this form thirty (30) days after issuance may be driving under suspension. All law enforcement officers may determine if the holder is driving under suspension by contacting the nearest Mississippi Highway Safety Patrol or any Mississippi Justice Information Center terminal.

This receipt and permit is issued to individuals who have taken a breath test to determine Alcohol Content and the results indicated a Breath Alcohol Content as specified under the Implied Consent Law and Section 63-1-83, Mississippi Code 1972, Annotated.

VIOLATOR'S SUSPENSION NOTICE

This form is valid as a driver permit for a period of thirty (30) days from the date of arrest. You have the right to request a trial within thirty (30) days to the court of original jurisdiction. If you request a trial within thirty (30) days and such trial is not commenced within thirty (30) days, then the court shall determine if the delay in the trial is your fault or that of counsel. If the court finds that the delay is not your fault or that of your counsel, then the court shall issue an order to the Commissioner of Public Safety extending your driving privileges pending the outcome of your case as provided under Section 63-11-23 (2), Mississippi Code.

If you do not request a trial before the expiration of this permit, your license will be suspended. The period of suspension is for ninety (90) days if you are operating a non-commercial vehicle and could be from one (1) year to ten (10) years if operating a commercial vehicle. This suspension is in addition to any other suspension imposed upon conviction for driving under the influence.

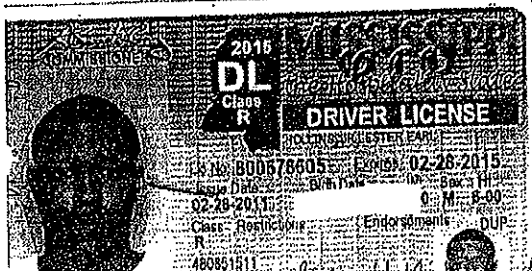
Arresting Officer's Name: SULLIVAN, BRADLEY, G

Signature of

Arresting Officer:

Enforcement Agency: MARION CO.

Badge No. 5023



SWORN TO AND SUBSCRIBED BEFORE ME,
 this the 12 day of March, 2015.
 Notary Public or Court Clerk
 WITHIN 24 HOURS MAIL TO:
 Statistical Branch
 Dept. D
 P.O. Box 958
 Jackson, Mississippi 39205

UNIFORM TRAF. TICKET		DRIVING UNDER THE INFLUENCE	
AGENCY CODE 0045		Madison County No 013799	
IN THE COURT DESIGNATED BELOW, THE AFFIANT HEREIN, BEING DULY SWORN, UPON OATH DOES DEPOSE AND SAY THAT WITHIN THE COUNTY OF MADISON , STATE OF MISSISSIPPI, AT THE FOLLOWING LOCATION, TIME AND DATE:			
HWY / ST Pine Knoll		DISTRICT 1	
DAY Wed	DATE 3-11-15	TIME OF STOP 11:25	ACCIDENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
NAME (FIRST NAME, MIDDLE NAME, LAST NAME) Walter E. Hollins			
LICENSE ADDRESS 110 Pine Knoll Dr 143			
CITY Ridgeland	STATE MS	ZIP CODE 39157	DATE OF BIRTH
DRIVER LICENSE NUMBER 803678605	CLASS D	SEX M	RACE B
VEHICLE LICENSE NUMBER MDR 651	STATE MS	YEAR/VEH. 2010	MAKE/MODEL Chev. Imp
DEFENDANT'S CURRENT ADDRESS			
DEFENDANT'S CURRENT TELEPHONE NUMBER			
<input checked="" type="checkbox"/> Offense occurred within the city limits of Ridgeland Mississippi			
<input type="checkbox"/> Violation pursuant to Commercial Driver's License Law. <input type="checkbox"/> Required placard under Hazardous Materials Transportation Act			
That the aforesaid person did, in violation of § 63-11-30(1) Mississippi Code of 1972, willfully and unlawfully drive or otherwise operate a motor vehicle within this state:			
<input checked="" type="checkbox"/> (a) Under the influence of intoxicating liquor; or			
<input type="checkbox"/> (b) Under the influence of any other substance which impaired such person's ability to operate a motor vehicle; or			
<input type="checkbox"/> (c) Under the influence of any drug or controlled substance, the possession of which is unlawful under the Mississippi Controlled Substances Law; or			
<input type="checkbox"/> (d) Has an alcohol concentration in the person's blood, based upon grams of alcohol per 100ml of blood, or grams of alcohol per 200L of breath, as shown by a chemical analysis of the person's breath, blood or urine administered as authorized by this chapter; or:			
<input checked="" type="checkbox"/> (f) Eight one-hundredths percent (.08%) or more for a person who is above the legal age to purchase alcoholic beverages under state law, to wit 11% ; or			
<input type="checkbox"/> (g) Two one-hundredths percent (.02%) or more for a person who is below the legal age to purchase alcoholic beverages under state law, to wit 11% ; or			
<input type="checkbox"/> (h) Four one-hundredths percent (.04%) or more for a person operating a commercial motor vehicle, to wit 11% .			
After such person has been convicted of _____ one prior offense or _____ two prior offenses under § 63-11-30 (1) on the _____ day of _____, 20____, in the _____ court of _____ county/city of _____ State of _____, on the _____ day of _____, 20____, in the _____ court of _____ county/city of _____ State of _____, and the offenses having been committed within five years.			
AGAINST THE PEACE AND DIGNITY OF THE STATE OF MISSISSIPPI			
OFFICER'S SIGNATURE [Signature]		UNIT / BADGE # 50-22	
SWORN TO BEFORE ME, THIS THE 12 DAY OF March , 20 15		[Signature]	
		(NAME AND TITLE)	
AFFRAIGNMENT DATE BEFORE:			
<input type="checkbox"/> MUNICIPAL COURT <input checked="" type="checkbox"/> JUSTICE COURT ON THE 30th DAY OF April , 20 15 at _____ am/pm			
COURT'S PHYSICAL ADDRESS 2961 SOUTH LIBERTY ST. CANTON, MS 39046			
COURT'S MAILING ADDRESS 2961 SOUTH LIBERTY ST. CANTON, MS 39046			
COURT'S TELEPHONE NUMBER () 601-859-6937			
CASE # _____		DOCKET # _____	
OFFENSE: FIRST <input checked="" type="checkbox"/> SECOND <input type="checkbox"/> THIRD OR SUBSEQUENT <input type="checkbox"/>			
ORIGINAL/AFFIDAVIT - THIS COPY MUST BE FILED WITH THE COURT OR COURT CLERK			
Exempt - 8-27-15			
THE DEFENDANT CHARGED HEREIN:			
_____ WAIVED defendant's right to an attorney after having been advised by the trial judge of the defendant's right to an attorney, and, if the defendant could not afford an attorney that one would be appointed free of charge to represent the defendant; or _____ WAS REPRESENTED (EMPLOYED OR APPOINTED) by an attorney whose name, address and telephone number is:			
Name _____		Phone () _____	
Address _____		SIGNATURE OF JUDGE [Signature]	

ORIGINAL / AFFIDAVIT

Rev. 7-14

STATE OF MISSISSIPPI - UNIFORM TRAFFIC TICKET									
Madison County		Agency Code		0045		No. 120609		<input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2	
IN THE COURT DESIGNATED BELOW, THE AFFAINT HEREIN, BEING DULY SWORN, UPON OATH DOES DEPOSE AND SAY, AT THE FOLLOWING LOCATION, TIME AND DATE:									
Location of Violation		Date		Time		<input type="checkbox"/> AM <input checked="" type="checkbox"/> PM		<input type="checkbox"/> Accident <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Pin-tnell		3-11-75		11:25		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> District <input checked="" type="checkbox"/> Precinct	
Location of Violation		Middle Name		Last Name		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> District <input checked="" type="checkbox"/> Precinct	
Pin-tnell		E. Hollins Jr.		Jr.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> District <input checked="" type="checkbox"/> Precinct	
Defendant: (First Name, Middle Name, Last Name)									
License Address 110 Pine Knoll Dr. Apt 143 City State Zip Code Mobile AL 36517									
Driver's License Number 2106672605 Vehicle License Number MS 231 MS 15 Make Year Make Model Type 1981 Chevy Impala 1981 PC									
Defendant's Current Address:									
Defendant's Current Telephone Number:									
That the above named defendant, while operating the aforementioned motor vehicle, did willfully and unlawfully commit the offense of:									
(Check Only One Offense, Each Detail)									
SPEED ZONE									
<input type="checkbox"/> S92 Speeding <input type="checkbox"/> M14 Disregard for Traffic Device <input type="checkbox"/> N70 Driving Wrong Side Road <input type="checkbox"/> B26 Driving While License Suspended <input type="checkbox"/> M14 Following Too Closely <input type="checkbox"/> M10 Improper Passing <input type="checkbox"/> M81 Failure to Yield Right Of Way <input type="checkbox"/> M84 Reckless Driving <input type="checkbox"/> M61 Careless Driving <input type="checkbox"/> Explanation:									
<input type="checkbox"/> Check Only If Driver License is Suspended in Lieu Of Bond Or Other Security. <input type="checkbox"/> Violation Pursuant To Commercial Driver's License Law.									

Hollins, Lester E.

Judge 3

Case No(s) _____

Arrignment Date _____

Bond _____

Defendant Hollins, Lester

Address _____

SSN _____ SL _____

Phone # _____

Employer _____

Phone # of Employer _____

Supervisor _____ Verified _____

Charges DUI 1st Other Sub

Arrest Elliott, George Date Summoned _____

Other Witnesses Concert

Bonding Companies _____ App. Date June 21, 2015

Hearing Date Sept 22, 10:30p

Continued to _____ for _____

Continued to _____ for _____

Continued to _____ for _____

Attorney _____

Notes _____



MISSISSIPPI CRIME LABORATORY

ASCLD/LAB Accredited since 2003



Lab Case #: 05-005324

Main Laboratory

Request: 0001
Page 1 of 2
Drug Screen Report1700 E. Woodrow Wilson Ave.
Jackson, MS 39216
601-987-1600
FAX: 601-987-1615

May 27, 2005

George Elliott
MADISON COUNTY SHERIFF OFFICE
2935 Highway 51
Canton, MS 39046

SUSPECT: Lester Hollins

REFERENCE- Agency Case # 05-7406

REQUEST FOR ANALYSISOn 4/26/2005 it was requested that the Mississippi Crime Laboratory perform the following analysis:
Drug Screen - Traffic RelatedEVIDENCE

On 4/26/2005 at 10:55 AM, Toxicology Case Coordinator Laviesta Ferrell received the following evidence from the MADISON COUNTY SHERIFF OFFICE via George Elliott:

Evidence Submission 001

One sealed biological specimens kit labeled "Lester Hollins"
containing one specimen container of urineDRUG SCREEN RESULTS

	Method	Result
Submission #: 001		
Amphetamine/Methamphetamine (Urine)	Immunoassay	Negative
Barbiturates (Urine)	Immunoassay	Negative
Benzodiazepines (Urine)	Immunoassay	Negative
Cannabinoids (marihuana) (Urine)	Immunoassay	* See Below
Cocaine metabolite (Urine)	Immunoassay	Negative
Methadone (Urine)	Immunoassay	Negative
Opiates (Urine)	Immunoassay	Negative
Phencyclidine (Urine)	Immunoassay	Negative
Propoxyphene (Urine)	Immunoassay	Negative
Tricyclic Antidepressants (Urine)	Immunoassay	Negative

CONT'D:

Laboratory Report Continued

REFERENCE- MCL Case Number 05-005324

Page 2 of 2

* Immunoassay Screening indicated the need for further analysis, please refer to either "Drug Confirmation Results" or "Remarks".

DRUG CONFIRMATION RESULTS

RESULTS:

Method	Results
Submission #: 001	
GC/MS	Delta-9 Carboxy THC

Urine from container labeled "Lester Hollins"

Case Analyst:

Maury Phillips

Maury Phillips
Sec. Chief - Implied Consent

Technical Reviewer:

Sam L. Howell

Sam Howell, DFTCB
Forensic Division Coordinator

CC:

iResults DA - 20th Judicial District

This report represents the analytical results of the examinations performed on the items of evidence in this case. It should be noted that this report does not represent all documentary items contained in the master file. Should additional material be required for court purposes, please contact the laboratory as soon as possible.

All samples submitted for toxicological examination will be routinely disposed of six (6) months after analyses are completed. If you anticipate that this evidence will be needed, please contact the laboratory to arrange for its return.

1. CASE NO. 05-7406		MADISON COUNTY SHERIFF'S OFFICE NARRATIVE		2. Page 1 of 1	
3. COMPLAINANT'S NAME (Firm's Name if A Complainant)		4. OFFENSE DISPOSITION 10 <input checked="" type="checkbox"/> Cleared Adult Arrest 30 <input type="checkbox"/> Cleared Juvenile Custody 61 <input type="checkbox"/> Open/Active		20 <input type="checkbox"/> Cleared Exception Adt 40 <input type="checkbox"/> Cleared Exceptional Juv. 62 <input type="checkbox"/> Inactive 70 <input type="checkbox"/> Unfounded	
5. Type Offense DuI 1st (other)		6. Date/Time of Report 0020 4/25/05		7. Reporting Officer No. 5026	
				8. Reporting Officer's Name Gerry Elliott	

NARRATIVE

arrested: hester E. Hallins

charge: DuI 1st (marijuana)

W. County line / I220
CD

Vehicle came thru check point. Strong odor of marijuana coming from vehicle. Subject's eyes heavy/bloodshot. Speech slow and slurred, movements slow and unsure. A small partially smoked blunt found in vehicle. Submitted to urine test.

MISSISSIPPI DEPARTMENT OF PUBLIC SAFETY

OPERATOR MUST READ THE FOLLOWING TO THE SUBJECT:

Mr. (Mrs. or Ms.) Lester E Hollins you have the right to refuse the Intoxilyzer test which is being offered to determine your breath alcohol content. Should you elect to refuse, your driver's license and/or driving privilege to operate a motor vehicle upon the public streets and highways of this state shall be suspended for ninety (90) days if it is the first offense, or for one (1) year if you have been previously convicted of a violation of Section 63-11-30, Mississippi Code of 1972." WARNING TIME: 0129

INTOXILYZER 5000 OPERATIONAL CHECK LIST

Time of observation Start: 0020 ; Subject must be under observation for twenty minutes before test is administered. Time of Test: 0132 No test shall be given to any person within twenty (20) minutes after regurgitation or consumption of any substance by mouth.

- _____ 1. Make sure the instrument is on.
- _____ 2. Attach the mouthpiece.
- _____ 3. Press the Start Test Button.
- _____ 4. Insert the Test Record Card.
- _____ 5. Obtain Subject Breath Sample.
- _____ 6. Remove the Test Record Card.
- _____ 7. Remove the Mouthpiece.
- _____ 8. Complete the Operation Checklist form and enter test information into the Intoxilyzer Log Book.



I CERTIFY THIS TO BE
TRUE AND CORRECT COPY

by Mary McNeal D.S.
Record Clerk

Subject Tested: Lester E. Hollins
(PLEASE PRINT)

Test Conducted by: George Elliott

Date: Mon / 425 , 20 05 Time: 0132 A.M. P.M.
(Day) (Month)

OPERATOR MUST READ THE FOLLOWING TO THE SUBJECT:

"You have the right to make a telephone call for legal or medical assistance after being booked."

Citation Number: 5733
Approved by: Mississippi Crime Laboratory and
Commissioner of Public Safety

Signature: [Signature]

DPS IP-29 (07/02)

SOBRIETY CHECKPOINT GUIDELINES

- 1 LOCATION W. County Line / I 220
- 2 SUPERVISOR IN CHARGE George Elliott
- 3 NUMBER OF OFFICERS 6
- 4 BRIEFING OF PERSONNEL yes
- 5 METHOD OF SELECTING MOTORIST all
- 6 REMOVAL OF VEHICLES rotation
- 7 NUMBER OF ARRESTS 9
- 8 NUMBER OF MOTORIST FIELD TESTED 11
- 9 ANY UNUSUAL INCIDENT OF SAFETY PROBLEMS NO

8 DUI

2 Expired tags

3 DWLS

1 poss of marijuana

1 child restraint

I CERTIFY THIS TO BE A
TRUE AND CORRECT COPY

by Mary McKeeth
Record Clerk

UNIFORM TRAFFIC TICKET		DRIVING UNDER THE INFLUENCE	
AGENCY CODE 0045		Madison County	
IN THE COURT DESIGNATED BELOW, THE AFFIANT HEREBY DULY SWORN, UPON OATH DOES DEPOSE AND SAY THAT WITHIN THE COUNTY OF <u>Madison</u> STATE OF MISSISSIPPI, JUDICIAL DISTRICT <u>12</u> AT THE FOLLOWING LOCATION, TIME AND DATE:			
DATE <u>4/25/05</u>	TIME OF STOP <u>0020H</u>	DISTRICT <u>12</u>	ACCIDENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
NAME (AND HOME PHONE NUMBER) OF <u>Bestev E. Hollins</u>			
ADDRESS <u>3919 Skyview Dr. 7H</u>			
CITY <u>Jackson</u>	STATE <u>MS</u>	ZIP CODE <u>39213</u>	DATE OF BIRTH
DRIVER LICENSE # <u>[REDACTED]</u>	CLASS <u>R</u>	SEX <u>M</u>	RACE <u>B</u>
YEAR <u>05</u>	MAKE <u>Pontiac</u>	MODEL <u>Pk</u>	VEHICLE TYPE
OFFENSE OCCURRED WITHIN THE CITY LIMITS OF <u>Madison, Mississippi</u>			
<input checked="" type="checkbox"/> Violation pursuant to Commercial Driver's License Law. <input type="checkbox"/> Required placard under Hazardous Materials Transportation Act That the aforesaid person did, in violation of §63-11-30(1) Mississippi Code of 1972, willfully and unlawfully drive or otherwise operate a motor vehicle within this state:			
<input type="checkbox"/> (a) Under the influence of intoxicating liquor; or			
<input type="checkbox"/> (b) Under the influence of any other substance which impeded such person's ability to operate a motor vehicle; or			
<input type="checkbox"/> (c) Having an alcohol concentration of eight one-hundredths percent (.08%) or more for persons who are above the legal age to purchase alcoholic beverages under state law, to wit: _____ % or			
<input type="checkbox"/> Having an alcohol concentration of two one-hundredths percent (.02%) or more for persons who are below the legal age to purchase alcoholic beverages under state law, to wit: _____ % or			
<input checked="" type="checkbox"/> (d) Under the influence of any drug or controlled substance, the possession of which is unlawful under the Mississippi Controlled Substances Law; or			
<input type="checkbox"/> (e) Having an alcohol concentration of four one-hundredths percent (.04%) or more for persons operating a commercial vehicle, to wit: _____ %			
After such person has been convicted of _____ one prior offense or _____ two prior offenses under § 63-11-30 (1) on the _____ day of _____ in the _____ county/city of _____ State of _____, and the offenses having been committed within five years.			
OFFICER'S SIGNATURE <u>[Signature]</u> UNIT / BADGE # <u>5020</u>			
SWORN TO BEFORE ME, THIS THE <u>25</u> DAY OF <u>April</u> <u>2005</u>			
NAME AND TITLE <u>[Signature]</u>			
AFFIRMATION DATE BEFORE:			
<input type="checkbox"/> MUNICIPAL COURT <input checked="" type="checkbox"/> JUSTICE COURT ON THE <u>27</u> DAY OF <u>May</u> <u>2005</u>			
ADDRESS <u>172 N. UNION-CANTON, MS 39046</u> PHONE <u>601-838-6332</u>			
CASE # _____ PAGE # _____ ORIGINAL AFFIDAVIT - THIS COPY MUST BE FILED WITH THE COURT OR COURT CLERK			
THE DEFENDANT CHARGED HEREIN:			
<input type="checkbox"/> WAIVED defendant's right to an attorney after having been advised by the trial judge of the defendant's right to an attorney, and, if the defendant could not afford an attorney that one would be appointed free of charge to represent the defendant; or			
<input type="checkbox"/> WAS REPRESENTED (EMPLOYED OR APPOINTED) by an attorney whose name, address and telephone number is:			
Name: _____ Address: _____ Phone: _____			
SIGNATURE OF JUDGE _____			

ORIGINAL/AFFIDAVIT

Rev. 7-02

UNIFORM TRAFFIC TICKET				DRIVING UNDER THE INFLUENCE			
AGENCY CODE 0045		Madison County		005733			
IN THE COURT DESIGNATED BELOW, THE AFFIANT HEREIN, BEING DULY SWORN, UPON OATH DOES DEPOSE AND SAY THAT WITHIN THE COUNTY OF MADISON STATE OF MISSISSIPPI, AT THE FOLLOWING LOCATION, TIME AND DATE JUDICIAL DISTRICT X <input type="checkbox"/> 2							
Hwy / St W. Countyline / I2				DISTRICT 20 01			
DAY Monday		DATE 4/29/05		TIME OF STOP 0020 PM		ACCIDENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
NAME (FIRST NAME, MIDDLE NAME, LAST NAME) hester E. Hollins							
ADDRESS 3919 Skyview Dr. 7H							
CITY Jackson		STATE MS		ZIP CODE 39213			
DRIVER LICENSE NUMBER [REDACTED]		CLASS R		SEX M		RACE B	
VEHICLE LICENSE NUMBER 138 H F 2		STATE MS		YEAR 05		MODEL 2001	
VEHICLE TYPE P/K							
<input checked="" type="checkbox"/> Offense occurred within the city limits of Madison Co Mississippi <input type="checkbox"/> Violation pursuant to Commercial Driver's License Law. <input type="checkbox"/> Required placard under Hazardous Materials Transportation Act That the storepaid person did, in violation of §63-11-30(1) Mississippi Code of 1972, willfully and unlawfully drive or otherwise operate a motor vehicle within this state: <input type="checkbox"/> (a) Under the influence of intoxicating liquor; or <input type="checkbox"/> (b) under the influence of any other substance which impaired such person's ability to operate a motor vehicle; or <input type="checkbox"/> (c) (1) Having an alcohol concentration of eight one-hundredths percent (.08%) or more for persons who are above the legal age to purchase alcoholic beverages under state law, to wit: _____ % or <input type="checkbox"/> (2) Having an alcohol concentration of two one-hundredths percent (.02%) or more for persons who are below the legal age to purchase alcoholic beverages under state law, to wit: _____ % or <input checked="" type="checkbox"/> (d) under the influence of any drug or controlled substance, the possession of which is unlawful under the Mississippi Controlled Substances Law; or <input type="checkbox"/> (e) having an alcohol concentration of four one-hundredths percent (.04%) or more for persons operating a commercial vehicle, to wit: _____ % After such person has been convicted of _____ one prior offense or _____ two prior offenses under § 63-11-30 (1) on the _____ day of _____, in the _____ court of _____ county/city of _____ State of _____, on the _____ day of _____, in the _____ court of _____ county/city of _____, State of _____, and the offenses having been committed within five years.							
AGAINST THE PEACE AND DIGNITY OF THE STATE OF MISSISSIPPI							
OFFICER'S SIGNATURE [Signature]				UNIT / BADGE # 50206			
SWORN TO BEFORE ME, THIS THE 25 DAY OF April 2005				[Signature] (NAME AND TITLE)			
ARRAIGNMENT DATE BEFORE: <input type="checkbox"/> MUNICIPAL COURT <input checked="" type="checkbox"/> JUSTICE COURT ON THE 27 DAY OF May 2005 ADDRESS 178 N. UNION, CANTON, MS 39046 PHONE # 601-858-6327							
3480 2519 quilty 4/29/05 CASE # _____ PAGE # _____ DOCKET # _____ ORIGINAL/AFFIDAVIT - THIS COPY MUST BE FILED WITH THE COURT OR COURT CLERK							
THE DEFENDANT CHARGED HEREIN: <input type="checkbox"/> WAIVED defendant's right to an attorney after having been advised by the trial judge of the defendant's right to an attorney, and, if the defendant could not afford an attorney that one would be appointed free of charge to represent the defendant; or <input type="checkbox"/> WAS REPRESENTED (EMPLOYED OR APPOINTED) by an attorney whose name, address and telephone number is: Name: _____ Phone: _____ Address: _____							
				SIGNATURE OF JUDGE [Signature]			

ORIGINAL/AFFIDAVIT

Rev. 7-02

7406

LAWRENCE-GREENWOOD 20764

JACKSON COUNTY JUSTICE COURT

CASE RECORD OF STATE VERSUS HOLLINS LESTER E

COURT DATE: 9/22/2005 SET FOR: SET FOR HEARING

DEFENDANT NAME AND ADDRESS

HOLLINS LESTER E
3919 SHIRVIEW DR. 741
JACKSON, MS 39213000

CL/SE BOND 600.00 CASH AT JAIL M8825

CASE: MS0000005733 DUI CONTROLLED SUBSTANCE

AFFIANT/WITNESS: ELLIOTT GEORGE

ATTORNEY FOR DEF:

APPEARED: *yes*

PLEA: *Guilty*

O R D E R

DEFENDANT IS FOUND:

DEFENSE: *Guilty*

ORIGINAL ASSESSMENT CODES:

FINE \$

COSTS \$ 251.50

TOTAL \$ *600 convert*

PAYMENT SCHEDULE: TODAY'S AMOUNT \$

TERMS:

1ST PAYMENT DUE:

SO ORDERED, THIS THE *22* DAY OF *Sept* *05*

DOCL PAGE

Civil Appeal
JUSTICE COURT JUDGE

48 hours jail - susp

MA SEP

Don't drive while lic susp

COURT ORDER FOR ATTENDANCE
THE CANTON MASEP CLASS

Pursuant to Mississippi Code Section 63-11-30(2)(a), you are ordered to attend and successfully complete the MASEP class circled below. You must enroll in session one and attend all four sessions in sequence. Be sure to present this court order at your first class.

TIME: 6:30 P.M. - 9:30 P.M.
 WEDNESDAY NIGHTS

NAME HOLLINS LESTER E

ADDRESS 3919 SKYVIEW DR 2H
JACKSON MS 392130000

PLACE: MADISON CO. WIN JOB CENTER
 152 WATFORD PARKWAY DR.
 CANTON, MS 39046

INFORMATION: 1-800-678-2534
 or (662) 325-3423 between
 8 AM - 5 PM Monday - Friday

DRIVER'S
 LICENSE

DATE OF
 BIRTH

BAC

FEE: \$150 Check or money order payable
 to MASEP must be paid at Session 1

	<u>SESSION 1</u>	<u>SESSION 2</u>	<u>SESSION 3</u>	<u>SESSION 4</u>
	<u>NOV 11</u>	<u>NOV 18</u>	<u>DEC 02</u>	<u>DEC 09</u>
2004 Class 8				
2005 Class 1	JAN 05	JAN 12	JAN 19	JAN 26
2005 Class 2	FEB 09	FEB 16	FEB 23	MAR 02
2005 Class 3	MAR 16	MAR 23	MAR 30	APR 06
2005 Class 4	APR 20	APR 27	MAY 04	MAY 11
2005 Class 5	MAY 25	JUN 01	JUN 08	JUN 15
2005 Class 6	JUN 22	JUN 29	JUL 13	JUL 20
2005 Class 7	AUG 10	AUG 17	AUG 24	AUG 31
2005 Class 8	SEP 14	SEP 21	SEP 28	OCT 05
2005 Class 9	OCT 12	OCT 19	OCT 26	NOV 02
2005 Class 10	NOV 09	NOV 16	NOV 30	DEC 07

MASEP RULES:

1. Do not consume any alcohol or other drugs prior to attending class.
2. You must be on time for each session.
3. Do not bring guests.
4. No disruptive classroom behavior
5. You must adhere to all program rules and policies.

YOUTH COURT CASES ONLY:

Report MASEP status to
 Mississippi Highway Patrol

____ Yes ____ No

PLACE JUDGE'S SEAL HERE

JUDGE: CINDY B ALFORD

COURT: MADISON CO. JUSTICE COURT

DATE: 9-22-05

Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: HOLLINS LESTER E
3919 SKYVIEW DR 7H
JACKSON MS 39213-0000

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI Date: 6/29/2005
vs: Cause No: MS0 00-005733
HOLLINS LESTER E DUI CONTROLLED SUBSTANCE

This is to notify you that the above styled case has been set for
SET FOR HEARING on the 22nd day of September A. D. 2005
at 1:00 PM. Your attendance is required.
CINDY B ALFORD presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

Cheryl J Horn, D.C./CRIM DC

OUR ADDRESS MAY HAVE CHANGED BY YOUR COURT DATE,
PLEASE CALL 859-6337 FOR PROPER DIRECTIONS.

[Handwritten signature]

ALL COURT ORDER FINES AND COST ARE DUE ON COURT DATE

Justice Court of Harrison County
P.O. Box 110000, Biloxi
Gulfport, MS 39500
859-6337

TO: HOLLINS LESTER E
3117 E. HIGHWAY 90 N
JACKSON MS 39213-4110

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI Date: 6/29/2018
CASE: MSC 17-01273
HOLLINS LESTER E DUI CONTROLLED SUBSTANCE

This is to notify you that the above stated case has been set for
SET FOR HEARING on the 29th of September A. D. 2018
at 1:00 PM. Your attendance is required.
CINDY A. ALFORT presiding.

Susan McCarty, Clerk
Harrison County Justice Court

S. : _____

Cheryl J. Morris, D.C. of PM LC

OUR ADDRESS MAY HAVE CHANGED BY YOUR COURT DATE.
PLEASE CALL 859-6337 FOR PROPER DIRECTIONS.

ALL COURT ORDER FINES AND COST ARE DUE ON COURT DATE

Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: ELLIOTT GEORGE
2935 HWY 51
CANTON

MS 39046-0000

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 6/29/2005

vs:

Cause No: MSD 00-005733

HOLLINS LESTER E DUI CONTROLLED SUBSTANCE

This is to notify you that the above styled case has been set for
SET FOR HEARING on the 22nd day of September A. D. 2005
at 1:00 PM. Your attendance is required.

CINDY B ALFORD presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

Cheryl J Horn, D.C./CRIM DC

OUR ADDRESS MAY HAVE CHANGED BY YOUR COURT DATE,
PLEASE CALL 859-6337 FOR PROPER DIRECTIONS.

ALL COURT ORDER FINES AND COST ARE DUE ON COURT DATE



$$d\phi_{\alpha} = \frac{1}{2}\omega_{\alpha} + \frac{\sqrt{-1}}{2}\partial\bar{\partial}\log h_{\alpha}$$

Date: 22 July 49

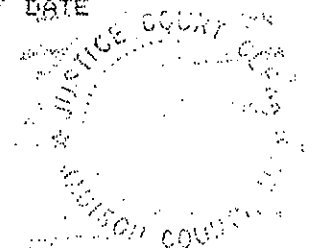
Case No. 1420 (1957)

1954年，在“五一”劳动节前夕，毛泽东主席在苏联大使馆接见了中国留学生代表，并发表了重要讲话。毛泽东主席在讲话中，首先向留学生们致以节日的问候，并高度评价了他们在苏联的学习成绩。接着，他语重心长地告诫留学生们，要牢记自己是中国人，要时刻维护国家的荣誉和利益。他特别强调，留学生们在国外要做一个“有心人”，要善于观察，善于思考，要善于学习，要善于总结。他要求留学生们要虚心向苏联人民学习，学习他们的先进技术和先进经验，同时要学习他们的优良品质和革命精神。毛泽东主席的讲话，给留学生们留下了深刻的印象，也激励了他们在今后的学习和工作中，要更加努力地工作，为祖国的建设贡献自己的力量。

1. Walter McGee, Clerk
 2. Walter McGee, Justice Court

Cher, J. H. 1964. D.C. 1964. DC

ALL COURT ORDER FINES AND COST ARE DUE ON COURT DATE



MADISON COUNTY JUSTICE COURT

CASE RECORD OF STATE VERSUS HOLLINS LESTER E

COURT DATE: 6/21/2005 SET FOR: INITIAL APPEARANCE

DEFENDANT NAME AND ADDRESS

HOLLINS LESTER E
3919 SKYVIEW DR 7H
JACKSON , MS 392130000

DL/SS BOND 600.00 CASH AT JAIL #6828

CASE: MS0000005733 DUI CONTROLLED SUBSTANCE

AFFIANT/WITNESS: ELLIOTT GEORGE

ATTORNEY FOR DEF:

APPEARED:

PLEA:

O R D E R

DEFENDANT IS FOUND:

SENTENCE:

CRIMINAL ASSESSMENT CODES:

FINE \$ COSTS \$ 238.00 TOTAL \$

PAYMENT SCHEDULE: TODAYS AMOUNT \$

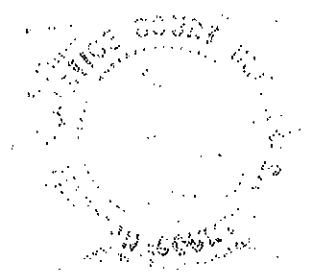
TERMS:

1ST PAYMENT DUE:

SO ORDERED, THIS THE _____ DAY OF _____, 2005.

DOC. _____ PAGE _____

JUSTICE COURT JUDGE



MADISON COUNTY JUSTICE COURT

CASE RECORD OF STATE VERSUS HOLLINS LESTER E

COURT DATE: 6/21/2005 SET FOR: INITIAL APPEARANCE

DEFENDANT NAME AND ADDRESS

HOLLINS LESTER E
3919 SKYVIEW DR 7H
JACKSON, MS 392130000

DL/SS BOND 600.00 CASH AT JAIL #6828

CASE: MS000005733 DUI CONTROLLED SUBSTANCE

AFFIANT/WITNESS: ELLIOTT GEORGE

ATTORNEY FOR DEF:

APPEARED: FLEA:

O R D E R

DEFENDANT IS FOUND:

SENTENCE:

CRIMINAL ASSESSMENT CODES:

FINE \$ COSTS \$ 238.00 TOTAL \$

PAYMENT SCHEDULE: TODAYS AMOUNT \$

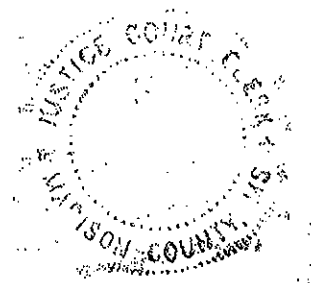
TERMS:

1ST PAYMENT DUE:

SO ORDERED, THIS THE _____ DAY OF _____

DOC. _____ PAGE _____

JUSTICE COURT JUDGE



4/25/05

MADISON CRIMINAL INFORMATION SYSTEM

BK00037622-

LESTER E. HOLLINS

***** RECEIPT ***** NUMBER 6,628

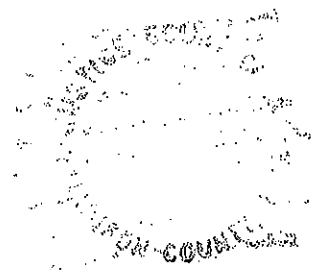
6/21/85
3

STATE OF MISSISSIPPI

MADISON COUNTY

COURT	**** CHARGE ****	** COURT DATE **	BOND AMOUNT *
JUSTICE	DUI/FIRST OFFENSE	0/00/00	CASH BON
	CASH BOND	\$	600.00
	WRITTEN BOND	\$	
	BOND FEES	\$	25.00
	TOTAL	\$	625.00

OFFICER:

Major, E
MAJOR, EBONY

Justice Court of Madison County
175 N. Union Street
Canton, MS 39046
859-6337

To: HOLLINS LESTER E
3919 SKYVIEW DR 7H
JACKSON MS 39213-0000

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 4/27/2005

vs:

Cause No: MSC 00-005733

HOLLINS LESTER E UNDER THE INFLUENCE OF A CONTROLLED SUBSTANCE

This is to notify you that the above styled case has been set for
INITIAL APPEARANCE on the 21st day of June A. D. 2005
at 1:00 PM. Your attendance is required.
CINDY B ALFORD presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

Shelia Taylor, DC Crime DC

OUR ADDRESS MAY HAVE CHANGED BY YOUR COURT DATE,
PLEASE CALL 859-6337 FOR PROPER DIRECTIONS.

ALL COURT ORDER FINES AND COST ARE DUE ON COURT DATE

Judge: 12

Case No.(s): _____

Arraignment Date: _____

Bond: _____

Defendant: Howard Antonio R.

Address: _____

SS # _____ SL # _____

Phone # _____

Employer: _____

Phone # of Employer: _____

Supervisor: _____ Verified: _____

Charges: Poss of Marijuana

Affiant: Deputy Barry Chandler

Date Subpoenaed: _____

Other Witnesses:

Bonding Companies: _____

App. Date: 10/14/15 9:00 AM.

Hearing Date: 03/24/16 9:00 AM.

Continued to _____ for _____

Continued to _____ for _____

Continued to _____ for _____

Attorney: _____

Notes: _____

THE STATE OF MISSISSIPPI

COUNTY OF MADISON

PERSONALLY APPEARED BEFORE ME

Cline Wyman

A Justice Court Judge/Clerk of said County,

DEPUTY BARRY CHANDLER

2941 HWY 51 South

Canton, Ms. 39046

Makes affidavit that:

ANTONIO R. HOWARD

Date of Birth _____ S.S.# _____

Address 240 NORTH HICKORY STREET

City CANTON State MS Zip 39046

on or about 7-9 2015 in the county aforesaid

DID WILLFULLY, UNLAWFULLY, AND KNOWINGLY POSSESS A CONTROLLED
SUBSTANCE OF A DOLLAR BILL CONTAINING A GREEN LEAFY SUBSTANCE BELEIVED
TO BE MARIJUANA. OFFENSE OCCURRED IN MADISON COUNTY, STATE OF
MISSISSIPPI.

AGAINST THE PEACE AND DIGNITY OF THE STATE OF MISSISSIPPI.

Sworn to and subscribed before me, this 9th day of July, 20 18.

Barry Chandler

R. W. R. C.

Justice Court Judge/ Clerk

Madison County Justice Court

175 N. Union Street

Canton, Ms. 39046

MADISON COUNTY JUSTICE COURT

CASE RECORD OF STATE VERSUS HOWARD ANTOIO R

CASE: MIS00-26578 CHARGE POSS MARIJUANA

COURT DATE: 3/24/2016

HOWARD ANTOIO R

AFFIANT/WITNESS:

ATTORNEY FOR DEF: HON. GREGORY WEBER

BOND: 450.00 PUGH BAIL JAIL RCPT#
APPEAL BOND:

=====

=====

O R D E R

DEFENDANT IS FOUND: GUILTY PLEA

SENTENCE:
GUILTY IN ABSENTIA. OFFICER WAS PRESENT.

FINE \$ 300.00 COSTS \$ 208.75 TOTAL \$ 508.75
SO ORDERED, THIS THE 24 DAY OF March 2016.
DOC. 3095 PAGE 89 BY: [Signature]
JUSTICE COURT JUDGE

CASE: MIS00026578 VIOLATION DATE: 7/09/2015 DATE CLOSED:

Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: HOWARD ANTOIO R
240 NORTH HICKORY STREET
CANTON MS 39046

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 10/19/2015

vs:

Cause No: MIS 00-026578

HOWARD ANTOIO R

RE: POSS MARIJUANA

This is to notify you that the above styled case has been set for
SET FOR HEARING on the 24th day of March A. D. 2016
at 9:00 AM. Your attendance is required.
MARSHA WEEMS STACEY presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

Earnestine Brown, DC

DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS OR DEBIT CARDS OR ATM CARDS

Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: CHANDLER BARRY DEPUTY
2941 HWY 51 SOUTH
CANTON MS 39046

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 10/19/2015

vs:

Cause No: MIS 00-026578

HOWARD ANTOIO R

RE: POSS MARIJUANA

This is to notify you that the above styled case has been set for
SET FOR HEARING on the 24th day of March A. D. 2016
at 9:00 AM. Your attendance is required.
MARSHA WEEMS STACEY presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

Earnestine Brown, DC

DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS OR DEBIT CARDS OR ATM CARDS

Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: HOWARD ANTOIO R
240 NORTH HICKORY STREET
CANTON MS 39046

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 7/14/2015

vs:

Cause No: MIS 00-026578

HOWARD ANTOIO R

RE: POSS MARIJUANA

This is to notify you that the above styled case has been set for
INITIAL APPEARANCE on the 14th day of October A. D. 2015
at 9:00 AM. Your attendance is required.
MARSHA WEEMS STACEY presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

Earnestine Brown, DC DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS OR DEBIT CARDS OR ATM CARDS

MADISON COUNTY JUSTICE COURT
2961 SOUTH LIBERTY
CANTON MS 39046
PHONE: (601) 859-6337

3/24/2016

TO: HOWARD ANTOLO R
240 NORTH HICKORY STREET
CANTON MS 390460000

RE: POSS MARIJUANA

ON 3/24/16, YOU WERE FOUND GUILTY IN ABSENTIA ON THE ABOVE
REFERENCED CHARGES. YOUR FINE AND COSTS OF \$ 508.75
MUST BE PAID BY 4/25/16.

YOU MAY APPEAL THIS CASE TO COUNTY COURT. YOUR APPEAL MUST
BE FILED WITH COUNTY COURT 30 DAYS FROM _____. YOUR
APPEAL BOND IS \$ _____ AND COST BOND IS \$ _____.

SUSAN MCCARTY JUSTICE COURT CLERK

WE DO NOT ACCEPT PERSONAL CHECKS OR DEBIT CARDS OR ATM CARDS

License #: 9201154

DONALD H. PUGH, SR. D.B.A

Pugh's Bail Bonding Company

337 Ellisville Blvd., Laurel, MS 39440

Office: 601-649-4040

Cell: 601-319-1211

Fax: 601-649-4045

County Madison City of Madison

We, Antonio R Howard, Principal, and Donald H. Pugh, Sr.

D.B.A, Pugh's Bail Bonding Company sureties agree to pay the State of Mississippi

four hundred fifty dollars.

KNOW ALL MEMBERS BY THESE PRESENTS that I, DONALD H. PUGH, SR., of
LAUREL, MISSISSIPPI PROFESSIONAL BAIL BONDSMAN, do hereby make constitute
and appoint Lashanda C Briggs-Hobbs to be my true, sufficient and lawful
attorney, for me and in my name, place and stead: To make execute and endorse and deliver bail
bonds for me and in my name in the State of Mississippi. Bond not exceeds \$500,000.00 per bond
without my consent.

Lashanda Briggs-Hobbs
MS Lic # 1017291
601-664-8318

Soliciting Agent Signature

Witness our signature, this the 9 day of July 20 15.

Adrea Smith
NOTARY PUBLIC



Donald H Pugh Sr.
DONALD H. PUGH, SR., SURETY
PROFESSIONAL BAIL BONDSMAN

Mississippi Statewide Notary Public
My Commission Expires July 27, 2017
Bonded Through Stegall Notary Service

POWER AMOUNT

450⁰⁰

PUGH'S BAIL BONDING COMPANY

Appearance Bond

+ 84584

DONALD H. PUGH, SR, Professional Bail Bonding Agent

337 Ellisville Blvd., Laurel, MS 39440

(O): 601-649-4040; (C) 601-319-1211

(F) 601-649-4045

Case#:

Docket #:

MISSISSIPPI LICENSE#: 9201154

KNOW ALL MEN BY THESE PRESENTS THAT WHEREAS THE UNDERSIGNED PRINCIPAL,

Antonio R. Howard has been charged with the offense ofControlled Substance Violation
in the Justice Court, City of Ridgeland, County of Madison

State of Mississippi, NOW THEREFORE WE UNDERTAKE JOINTLY AND SEVERALLY THAT SAID PRINCIPAL SHALL APPEAR AS REQUIRED FROM DAY TO DAY AND TERM TO TERM UNTIL DISCHARGED BY LAW, IN ANY COURT HAVING JURISDICTION IN THE MATTER, OR IF SHE SHALL FAIL TO APPEAR, WE WILL PAY TO THE COURT, (IN WHICH THE OFFENSE IS ALLEGED TO HAVE BEEN COMMITTED). THIS IS AN APPEARANCE BOND ONLY, NOT A GUARANTEE OF FINE OR COURT COST.

THE SUM OF four hundred & fifty DOLLARS

APPEAR IN COURT _____ A.M./P.M., _____ DAY OF _____, 20 _____

PRINCIPAL: _____

PRINT NAME: _____

ADDRESS: _____

PHONE #: _____

SS#: _____

INDEMNITOR: _____

PRINT NAME: _____

ADDRESS: _____

PHONE #: _____

SS#: _____

Lashanda Briggs-Hobbs
MS Lic # 1017291
601-664-8318

AGENT INFORMATION

X Lashanda Briggs-Hobbs
MS Lic # 1017291
601-664-8318
VOID IF NOT SIGNED BY AGENTX D. Donald H. Pugh Sr.
VOID IF NOT SIGNED BY OWNER

COLLATERAL: _____

THIS 9 DAY OF July, 20 15APPROVED BY: _____
Sheriff, Deputy, Clerk, or Chief

Jones Destiny A

10

Judge: _____

Case No.(s): _____

Arraignment Date: _____

Bond: _____

Defendant: Jones Destiny A.

Address: _____

SS # _____ SL # _____

Phone # _____

Employer: _____

Phone # of Employer: _____

Supervisor: _____ Verified: _____

Charges: Resisting Arrest, Disturbing the Peace

Affiant: Deputy Slade Moore Date Subpoenaed: _____

Other Witnesses:

Bonding Companies: _____

App. Date: 2/1/17 @ 9am

Hearing Date: March 9, 17 9a.m.

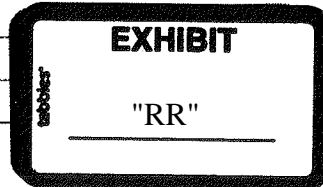
Continued to 5/4/17 for 9am

Continued to _____ for _____

Continued to _____ for _____

Attorney: Bob Walker

Notes: cc-John Scott Leach



GENERAL AFFIDAVIT

MS 028341
01

THE STATE OF MISSISSIPPI

COUNTY OF MADISON

PERSONALLY APPEARED BEFORE ME

Tommy Squires

A Justice Court Judge/Clerk of said County,

DEPUTY SLADE MOORE SO-8

2935 HWY 51 South

Canton, Ms. 39046

Makes affidavit that:

DESTINY A JONES

Date of Birth

S.S.#

Address

107 WAY CIR

City

CANTON

State MS

Zip 39046

on or about SUNDAY, NOVEMBER 27, 2012 in the county aforesaid

DID WILLFULLY AND UNLAWFULLY RESIST ARREST BY PULLING AWAY AND REFUSING
TO BE HANDCUFFED BY DEPUTY SLADE MOORE WHO HAD THE RIGHT TO MAKE A
LAWFUL ARREST. THIS OCCURRING ON I-55 AT 120 MM IN MADISON COUNTY
MISSISSIPPI

AGAINST THE PEACE AND DIGNITY OF THE STATE OF MISSISSIPPI.

Slade

Sworn to and subscribed before me, this 28 day of November, 2016

Tommy Squires SO6 D.C.

Justice Court Judge/ Clerk

Madison County Justice Court

175 N. Union Street

Canton, Ms. 39046



GENERAL AFFIDAVIT

MIS 028342
1

THE STATE OF MISSISSIPPI

COUNTY OF MADISON

PERSONALLY APPEARED BEFORE ME

Tommy Squires

A Justice Court Judge/Clerk of said County,

DEPUTY SLADE MOORE SO-8

2941 HWY 51 South

Canton, Ms. 39046

Makes affidavit that:

DESTINY A JONES

Date of Birth

S.S.#

Address

107 WAY CIR

City

CANTON

State MS

Zip 39046

on or about SUNDAY, NOVEMBER 27, 2016 in the county aforesaid

DISTURBING THE PEACE (97-35-15)

DID WILLFULLY AND UNLAWFULLY DISTURB THE PUBLIC PEACE BY YELLING AND
BEING LOUD AND BOISTEROUS, IN THE PRESENCE OF TWO OR MORE PERSONS,
LOCATED ON I-55 AT THE 120 MM CANTON, MS, BY WHICH THIS OFFENSE OCCURED
WITHIN MADISON COUNTY, STATE OF MISSISSIPPI.

AGAINST THE PEACE AND DIGNITY OF THE STATE OF MISSISSIPPI.

[Signature]

Sworn to and subscribed before me, this 28 day of November, 2016

Tommy Squires SO-8 DC,
Justice Court Judge/ Clerk

Madison County Justice Court

175 N. Union Street

Canton, Ms. 39046



CASE RECORD OF STATE VERSUS JONES DESTINY A

CASE: MIS00-28342 CHARGE DISTURBING THE PEACE

COURT DATE: 5/04/2017

JONES DESTINY A

AFFIANT/WITNESS:

ATTORNEY FOR DEF: HON. ROBERT WALLER

BOND:

JAIL RCPT#

APPEAL BOND:

O R D E R

DEFENDANT IS FOUND: REMANDED TO FILES

SENTENCE:

MOTION BY STATE TO REMAND FOR 6 MONTHS UNDER THE CONDITION OF ALL FINES AND COSTS PAID IN FULL AND UPON GENERAL GOOD BEHAVIOR FOR 6 MONTHS. DEFENDANT DOES NOT NEED TO REPORT BACK AT THE END OF THE REMAND PERIOD UNDER THE CONDITION OF NO FURTHER CHARGES.

SO ORDERED, THIS THE 4th DAY OF May, 2017.

DOC. 2068

PAGE

98

BY:

Walter B. Huff
JUSTICE COURT JUDGE

CASE: MIS00028342 VIOLATION DATE: 11/27/2016 DATE CLOSED:



CASE RECORD OF STATE VERSUS JONES DESTINY A

CASE: MIS00-28341 CHARGE RESISTING ARREST

COURT DATE: 5/04/2017

JONES DESTINY A

AFFIANT/WITNESS:

ATTORNEY FOR DEF: HON. ROBERT WALLER

BOND:

JAIL RCPT#

APPEAL BOND:

O R D E R

DEFENDANT IS FOUND: GUILTY PLEA

SENTENCE:

GUILTY PLEA, 30 DAYS IN THE MADISON COUNTY JAIL SUSPENDED UNDER THE
CONDITION OF NO FURTHER CHARGES OF THIS NATURE FOR 6 MONTHS. BALANCE TO :
PAID IN FULL WITHIN 90 DAYS.

FINE \$ 250.00 COSTS \$ 183.75 TOTAL \$ 433.75

SO ORDERED, THIS THE 4th DAY OF May, 2017.

DOC. 2068

PAGE 97

BY:

Martin B. Duff
JUSTICE COURT JUDGE

CASE: MIS00028341 VIOLATION DATE: 11/27/2016 DATE CLOSED



Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: MOORE SLADE DEPUTY SO-8
2935 HWY 51 SOUTH
CANTON MS 39046

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 3/09/2017

vs:

Cause No: MIS 00-028342

JONES DESTINY A

RE: DISTURBING THE PEACE

This is to notify you that the above styled case has been set for
SET FOR HEARING on the 4th day of May A. D. 2017
at 9:00 AM. Your attendance is required.

MARTINA GRIFFIN presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

STEPHANIE BURTON, DC

DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS



Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: JONES DESTINY A
107 WAY CIRCLE
CANTON MS 39046

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 3/09/2017

vs:

Cause No: MIS 00-028342

JONES DESTINY A

RE: DISTURBING THE PEACE

This is to notify you that the above styled case has been set for
SET FOR HEARING on the 4th day of May A. D. 2017
at 9:00 AM. Your attendance is required.
MARTINA GRIFFIN presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

STEPHANIE BURTON, DC

DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS



Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: MOORE SLADE DEPUTY SO-8
2935 HWY 51 SOUTH
CANTON MS 39046

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 3/06/2017

vs:

Cause No: MIS 00-02834-1

JONES DESTINY A

RE: RESISTING ARREST

This is to notify you that the above styled case has been set for
SET FOR HEARING on the 4th day of May A. D. 2017
at 9:00 AM. Your attendance is required.
MARTINA GRIFFIN presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

STEPHANIE BURTON, DC

DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS



Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
669-6337

To: JONES DESTINY A
107 WAY CIRCLE
CANTON MS 39046

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 3/06/2017

vs:

Cause No: MIS 00-028341

JONES DESTINY A

RE: RESISTING ARREST

This is to notify you that the above styled case has been set for
SET FOR HEARING on the 4th day of May A. D. 2017
at 9:00 AM. Your attendance is required.
MARTINA GRUEFLIN presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

STEPHANIE BURTON, DC DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS



DATE: 3/06/2017

TO: JUDGE MARTINA GRIFFIN _____

RE: STATE OF MISSISSIPPI

VERSUS

JONES DESTINY A _____

AFFIANT/DEFENDANT/ATTORNEY HAS CALLED REQUESTING A CONTINUANCE
IN THIS CASE FOR THE FOLLOWING REASON:

PER CHIEF WILLIAMS OF MADISON COUNTY S.O., THIS OFFICER
WILL BE IN TRAINING, THURSDAY, MARCH 9TH.
REQUESTING CONTINUANCE ON ALL CASES

☒ CONTINUANCE WILL BE GRANTED

☐ CONTINUANCE WILL NOT BE GRANTED

THIS THE 6th DAY OF March, 2017

Martina B. Griffin
MARTINA GRIFFIN

Susan McCarty ICC
DEPUTY CLERK



Susan McCarty

From: Jeremy Williams
Sent: Monday, March 06, 2017 12:52 PM
To: Susan McCarty
Subject: Thursday court

Midnight shift has some training scheduled on Thursday that is going to conflict with court. I am a week behind letting you know. But if possible to get a continuance for Slade Moore, Donovan Gerlach, and James Hall on Thursday that would help us out. Rylon Thompson is the only other midnight guy scheduled on Thursday, but his cases are at 1 p.m. so he should be fine to make the afternoon court.

Thanks,

Jeremy Williams
Chief Deputy

Madison County Sheriff's Department
2941 Hwy 51 Canton, MS 39046
Office Phone: 601-855-0715
Cell: 601-855-0779



This Email is covered by the Electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521 and is legally privileged. The information contained in this Email is intended only for use of the individual or entity named above. If the reader of this message is not the intended recipient, or the employee or agent responsible to deliver it to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited by the Madison County Sheriff's Department. If you have received this communication in error, please immediately notify our office by telephone at 601-855-0715, and destroy the original message.



Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: JONES DESTINY A
107 WAY CIRCLE
CANTON MS 39046

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 2/02/2017

vs:

Cause No: MIS 00-028341

JONES DESTINY A

RE: RESISTING ARREST

This is to notify you that the above styled case has been set for
SET FOR HEARING on the 9th day of March A. D. 2017
at 9:00 AM. Your attendance is required.
MARTINA GRIFFIN presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

Cheryl Horn, CDC

DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS



Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: MOORE SLADE DEPUTY SO-8
2935 HWY 51 SOUTH
CANTON MS 39046

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 2/02/2017

vs:

Cause No: MIS 00-028341

JONES DESTINY A

RE: RESISTING ARREST

This is to notify you that the above styled case has been set for
SET FOR HEARING on the 9th day of March A. D. 2017
at 9:00 AM. Your attendance is required.
MARTINA GRIFFIN presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

Cheryl Horn, CDC

DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS



Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: JONES DESTINY A
107 WAY CIRCLE
CANTON MS 39046

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 2/02/2017

vs:

Cause No: MIS 00-028342

JONES DESTINY A

RE: DISTURBING THE PEACE

This is to notify you that the above styled case has been set for
SET FOR HEARING on the 9th day of March A. D. 2017
at 9:00 AM. Your attendance is required.
MARTINA GRIFFIN presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

Cheryl Horn, CDC

DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS



Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: MOORE SLADE DEPUTY SO-8
2935 HWY 51 SOUTH
CANTON MS 39046

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 2/02/2017

vs:

Cause No: MIS 00-028342

JONES DESTINY A

RE: DISTURBING THE PEACE

This is to notify you that the above styled case has been set for
SET FOR HEARING on the 9th day of March A. D. 2017
at 9:00 AM. Your attendance is required.
MARTINA GRIFFIN presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

Cheryl Horn, CDC

DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS



2/1/17

CTION TO BE TAKEN BY CLERK UPON REQUEST OF COUNTY
ROSECUTOR

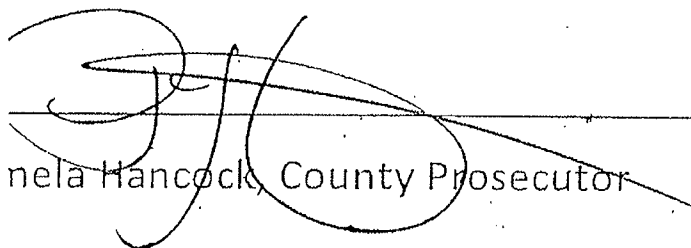
ATE VERSUS

Destiny Jones

☒ SET FOR TRIAL

☐ SET FOR PLEA

☐ SET FOR NON-ADJUDICATION


Jela Hancock, County Prosecutor



Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: JONES DESTINY A
107 WAY CIRCLE
CANTON MS 39046

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 12/09/2016

vs:

Cause No: MIS 00-028342

JONES DESTINY A

RE: DISTURBING THE PEACE

This is to notify you that the above styled case has been set for
INITIAL APPEARANCE on the 1st day of February A. D. 2017
at 9:00 AM. Your attendance is required.

MARTINA GRIFFIN presiding. .

Susan McCarty, Clerk
Madison County Justice Court

By: _____

STEPHANIE BURTON, DC

DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS



Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: JONES DESTINY A
107 WAY CIRCLE
CANTON MS 39046

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 12/09/2016

vs:

Cause No: MIS 00-028341

JONES DESTINY A

RE: RESISTING ARREST

This is to notify you that the above styled case has been set for
INITIAL APPEARANCE on the 1st day of February A. D. 2017
at 9:00 AM. Your attendance is required.

MARTINA GRIFFIN presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

STEPHANIE BURTON, DC

DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS



POWER OF ATTORNEY
VOID IF NOT EXECUTED BY:
\$1,000
MAY 15 2017

POWER OF ATTORNEY
American Surety Company

AS1 422552

P.O. Box 68932, Indianapolis, IN 46268

KNOW ALL MEN BY THESE PRESENTS: that AMERICAN SURETY COMPANY, a corporation duly authorized and existing under the laws of the State of Indiana, does constitute and appoint the below named agent its true and lawful Attorney-in-Fact for it and in its name, place and stead, to execute, and deliver for and on its behalf, as surety, a bail bond only.

Authority of such Attorney-in-Fact is limited to appearance bonds. No authority is provided herein for the execution of surety immigration bonds or to guarantee alimony payments, fines, wage law claims or other payments of any kind on behalf of below named defendant. The named agent is appointed only to execute the bond consistent with the terms of this power of attorney. The agent is not authorized to act as agent for receipt of service of process in any criminal or civil action.

This power is void if altered or erased or used in any combination with other powers of attorney of this company or any other company to obtain the release of the defendant named below or to satisfy any bond requirement in excess of the stated face amount of this power. This power can only be used once. No authority is provided to a copy of facsimile of this power of attorney without the prior written consent of American Surety Company. The obligation of the company shall not exceed the sum of

ONE THOUSAND (\$1,000.00) DOLLARS

and provided this Power-Of-Attorney is filed with the bond and retained as a part of the court records. The said Attorney-In-Fact is hereby authorized insert in this Power-Of-Attorney the name of the person on whose behalf this bond was given.

IN WITNESS WHEREOF, AMERICAN SURETY COMPANY has caused these presents to be signed by its duly authorized officer, proper for the purpose and its corporate seal to be hereunto affixed this 27th day of November, 20 16.

Bond Amount \$ 1,000 Appearance Date _____

Defendant: Darion Jones

Court Justice Case # _____

County Madison city Canton St. MS Zip 39046

Offense Disturbing the Peace; Fleeing HEA MP

Executing Agent Aman Eze MP

AMERICAN SURETY COMPANY



William B. Carmichael

President

ASC-9A



FESCO'S BONDING COMPANY

274 PEACE STREET
CANTON, MS 39046

SEND ALL COURT NOTICE TO:

AMERICAN SURETY COMPANY

P. O. BOX 68932

INDIANAPOLIS, INDIANA 46268

APPEARANCE BOND

FRED ESCO, JR

AMAYA ESCO

LICENSE NUMBER: 7702927

LICENSE NUMBER: 545

274 W. PEACE STREET

155 HARRINGTON DR.

CANTON, MS. 39046

CANTON, MS. 39046

IN THE Justice COURT, COUNTY OF Madison STATE OF MISSISSIPPIVS MSDestiny Jones

KNOWN ALL MEN BY THESE PRESENTS:

THAT FESCO's Bonding AS PRINCIPAL AND AMERICAN SURETY COMPANY, FRED ESCO, JR DBA
FESCO'S BONDING COMPANY, AS SURETY (IDENTIFIED BY ATTACHED POWER OF ATTORNEY NO 422552 ARE
HELD AND FIRMLY BOUNDY UNTO THE Justice IN THE SUM OF 1,000 FOR THE

PAYMENT WHEREOF WELL AND TRULY TO BE MADE WE BIND OURSELVES, OUR HEIRS, EXECUTORS, ADMINISTRATORS,
SUCCESSOR AND ASSIGN JOINTLY AND SEVERALLY FIRMLY BY THESE PRESENTS.

SIGNED AND SEALED THIS 27th DAY OF November A.D. 20 16 THE CONDITION OF THIS OBLIGATION
IS SUCH THAT IF THE SAID Destiny Jones PRINCIPAL, SHALL APPEAR AT THE NEXT REGULAR OR SPECIAL
TERM OF THE Justice COURT Canton MS TO BE HELD IN AND FOR SAID
COUNTY TO ANSWER CHARGE OF Disturbing the Peace, Fleecing HEA

----- AND SHALL APPEAR FROM DAY TO DAY AND TERM TO TERM OF

SAID COURT AND NOT DEPART THE SAME WITHOUT LEAVE THEN THIS OBLIGATION TO BE VOID, ELSE TO REMAIN IN FULL
FORCE AND VIRTUE.

TAKEN BEFORE AND APPROVED BY ME:

(LS)

BY: _____

(LS)

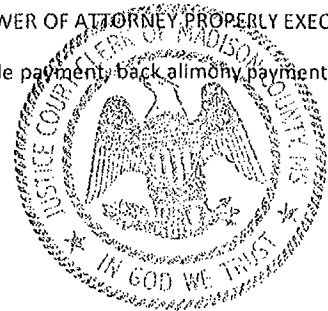
x Destiny Jones
PRINCIPAL SIGNATURE

x Amaya Escos
ATTORNEY-IN-FACT

AMERICAN SURETY COMPANY/ FESCO BONDING COMPANY

THIS BOND NOT VALID UNLESS ACCOMPANIED BY AN INDIVIDUALLY NUMBERED POWER OF ATTORNEY PROPERLY EXECUTED

NOTE: This is an Appearance Bond and construed as a guarantee for failure to provide payment, back alimony payment, Fines,
Wage Law Claims, nor can it be used as a Bond Appeal.



McKAY
ARCHIE
B.

Defendant: _____

Address: _____

SS # _____ SL # _____

Phone # _____

Employer: _____

Phone # of Employer: _____

Supervisor: _____ Verified: _____

Charges: _____

Judge: _____

Case No. (s): _____

Arraignment Date: _____

Bond: _____

Affiant: _____ Date Subpoenaed: _____

Other Witnesses: _____

Conner
Yehund



Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: MCKAY ARCHIE B
1213 CAUTHEN RD
CAMDEN MS 39045

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI Date: 1/21/2016
vs: Cause No: MSO 00-119624
MCKAY ARCHIE B
RE: NO PROOF LIABILITY INSURANCE

This is to notify you that the above styled case has been set for
TO PRESENT PROOF DOC on the 10th day of February A. D. 2016
at 9:00 AM. Your attendance is required.
MARSHA WEEMS STACEY presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

Cheryl Horn, CDC DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS OR DEBIT CARDS OR ATM CARDS

MADISON COUNTY JUSTICE COURT

CASE RECORD OF STATE VERSUS MCKAY ARCHIE B

CASE: MSO00-119623 CHARGE IMPROPER/NO DRIVER LIC

COURT DATE: 2/10/2016

MCKAY ARCHIE B

AFFIANT/WITNESS: CHANDLER BARRY DEPUTY

ATTORNEY FOR DEF:

BOND: 500.00 CASH AT JAIL #24964 JAIL RCPT#

APPEAL BOND:

=====

O R D E R

DEFENDANT IS FOUND: CASE DISMISSED

SENTENCE:

MOTION BY STATE TO DISMISS/DEFENDANT PROVIDED PROOF OF VALID D/L
REFUND BOND

SO ORDERED, THIS THE 10 DAY OF Feb 2016

DOC. 3095

PAGE 40

BY: [Signature]

JUSTICE COURT JUDGE

CASE: MSO00119623 VIOLATION DATE: 4/11/2015 DATE CLOSED:

MADISON COUNTY JUSTICE COURT

CASE RECORD OF STATE VERSUS MCKAY ARCHIE B

CASE: MSO00-119624 CHARGE NO PROOF LIABILITY INSURANCE

COURT DATE: 2/10/2016

MCKAY ARCHIE B

AFFIANT/WITNESS: CHANDLER BARRY DEPUTY

ATTORNEY FOR DEF:

BOND: 650.00 CASH AT JAIL #24964 JAIL RCPT#

APPEAL BOND:

O R D E R

DEFENDANT IS FOUND: GUILTY PLEA

SENTENCE:

DEFENDANT PROVIDED PROOF OF INSURANCE AFTER STOP.
CONVERT AND REFUND BOND

FINE \$ 100.00 COSTS \$ 132.50 TOTAL \$ 232.50

SO ORDERED, THIS THE 10 DAY OF Feb 2014

DOC. 3095 PAGE 39

BY: [Signature]
JUSTICE COURT JUDGE

CASE: MSO00119624 VIOLATION DATE: 4/11/2015 DATE CLOSED:

**IMPORTANT - IDEN
STATE**

FOLD TOP AND BOTTOM OF CARD ON PERFORATION

**MISSISSIPPI
INSURANCE CARD**

INSURED MCKAY, RUBY MUTL
VOL
POLICY NUMBER 251 1562-D14-24 EFFECTIVE
YR 1997 MAKE GMC JAN 28 2016 TO APR 14 2016
MODEL K1500 VIN 1GTEK19R1VES19513
AGENT ARNEL BOLDEN 3052-AA0
PHONE (601)859-8554 NAIC 25178
A BODILY INJURY/PROPERTY DAMAGE LIABILITY
H, U1

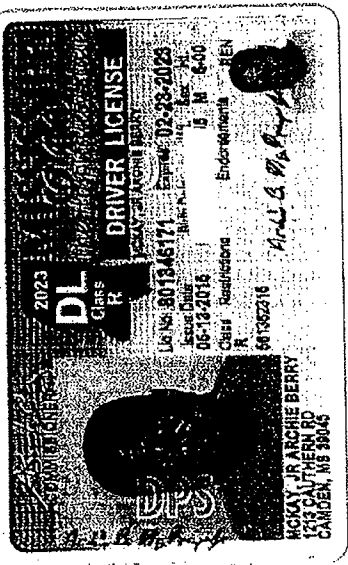
SEE REVERSE SIDE FOR ADDITIONAL COVERAGE INFORMATION

0004702525

141065 1 04 24 2017 to 5/9/2018

KEEP A CAR:
THIS CARD IS INVALID IF THE POLICY FOR WH
KEEP YOUR CURRENT CARD UNTIL

Valid license + insurance with State Farm



STATE OF MISSISSIPPI – UNIFORM TRAFFIC TICKET

Judicial District: ☐ 1 ☐ 2
MADISON COUNTY Agency Code **0045** **NO 119624**

IN THE COURT DESIGNATED BELOW, THE AFFRANT HEREIN, BEING DULY SWORN, UPON OATH DOES DEPOSE AND SAY, AT THE FOLLOWING LOCATION, TIME AND DATE:

Location of Violation
 Hwy 43
 Day Date 4-11-18 Time 12:22 AM ☐ PM ☐ Precinct
 Defendant: (First Name, Middle Name, Last Name)
 Archie R McKay
 License Address
 1213 Sutherland Road
 City State Zip Code
 Camden MS 39046
 Driver's License Number 801346171 Class State Sex
 Vehicle License Number 261641 Year Make Model Type
 2016 GMC Acadia S1 Fuel

Defendant's Current Telephone Number:
 That the above named defendant, while operating the aforementioned motor vehicle, did willfully and unlawfully commit the offense of:
 (Check Only One Offense Each Ticket)

SPEED ZONE

☐ S92 Speeding
☐ M14 Disregard For Traffic Device
☐ N70 Driving Wrong Side Road
☐ B26 Driving While License Suspended
☐ M34 Following Too Closely
☐ M70 Improper Passing
☐ N01 Failure To Yield Right Of Way
☐ M84 Reckless Driving
☐ M81 Careless Driving
☐ Explanation:

☐ F02 Child Restraint Violation
☐ F04 Seatbelt Violation
☐ B51 No Drivers License (Expired)
☐ B55 No Motor Vehicle Inspection (Expired)
☐ B53 Expired Tag/No Tag
☐ B26 Driving While License Suspended
☐ N50 Improper Turn
☒ D36 No Proof of Liability Ins.
☐ Other Violation ()

☐ Check Only If Driver License Is Deposited In Lieu Of Bond Or Other Security.
☐ Violation Pursuant To Commercial Driver's License Law.

STATE OF MISSISSIPPI – UNIFORM TRAFFIC TICKET

Judicial District: ☐ 1 ☐ 2
MADISON COUNTY Agency Code **0045** **NO 119623**

IN THE COURT DESIGNATED BELOW, THE AFFRANT HEREIN, BEING DULY SWORN, UPON OATH DOES DEPOSE AND SAY, AT THE FOLLOWING LOCATION, TIME AND DATE:

Location of Violation
 Hwy 43
 Day Date 4-11-18 Time 12:22 AM ☐ PM ☐ Precinct
 Defendant: (First Name, Middle Name, Last Name)
 Archie R McKay
 License Address
 1213 Sutherland Road
 City State Zip Code
 Camden MS 39046
 Driver's License Number 801346171 Class State Sex
 Vehicle License Number 261641 Year Make Model Type
 2016 GMC Acadia S1 Fuel

Defendant's Current Telephone Number:
 That the above named defendant, while operating the aforementioned motor vehicle, did willfully and unlawfully commit the offense of:
 (Check Only One Offense Each Ticket)

SPEED ZONE

☐ S92 Speeding
☐ M14 Disregard For Traffic Device
☐ N70 Driving Wrong Side Road
☐ B26 Driving While License Suspended
☐ M34 Following Too Closely
☐ M70 Improper Passing
☐ N01 Failure To Yield Right Of Way
☐ M84 Reckless Driving
☐ M81 Careless Driving
☐ Explanation:

☐ F02 Child Restraint Violation
☐ F04 Seatbelt Violation
☒ B51 No Drivers License (Expired)
☐ B55 No Motor Vehicle Inspection (Expired)
☐ B53 Expired Tag/No Tag
☐ B26 Driving While License Suspended
☐ N50 Improper Turn
☐ D36 No Proof of Liability Ins.
☐ Other Violation ()

☐ Check Only If Driver License Is Deposited In Lieu Of Bond Or Other Security.
☐ Violation Pursuant To Commercial Driver's License Law.

6 0-20-22 110407-11

Judge: _____
Case No.(s): _____
Arraignment Date: _____
Bond: _____

Defendant: _____
Address: _____
SS #: _____ SL #: _____
Phone #: _____
Employer: _____
Phone # of Employer: _____
Supervisor: _____ Verified: _____

Charges: _____

Affiant: _____ Date Subpoenaed: _____

Other Witnesses: _____

Bonding Companies: _____ App. Date: _____
_____ Hearing Date: _____
_____ Continued to _____ for _____
_____ Continued to _____ for _____
_____ Continued to _____ for _____

Attorney: _____

Notes: _____



STATE OF MISSISSIPPI - UNIFORM TRAFFIC TICKET									
IN THE COURT DESIGNATED BELOW, THE AFFIANT HEREIN, BEING ONLY SWORN, UPON OATH DEPOSE AND SAY: AT THE FOLLOWING LOCATION, TIME AND DATE:									
(NAME OF LAW ENFORCEMENT AGENCY)		AGENCY CODE		No 052339					
COUNTY/MUNICIPALITY OF:		0045							
MADISON COUNTY		JUDICIAL DISTRICT <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2							
Location of Violation		<input checked="" type="checkbox"/> Near <input type="checkbox"/> On							
S 1st St		Clark St							
Day	Date	Time	Accident	District	Precinct				
Sun	7/29/07	12:59 PM	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1	1				
Defendant (First Name, Middle Name, Last Name)		Antonio D Mitchell							
Address		120 Emmitt Rd							
City	State	Zip Code							
Flow	MS	39071							
Driver's License Number	Class	State	Sex	Race	Date of Birth				
088 HPG	R	MS	M	B					
Vehicle License Number	State	Year	Make	Model	Type				
088 HPG	MS	08	Ford	Probe	Tru				
THAT THE ABOVE NAMED DEFENDANT, WHILE OPERATING THE AFOREMENTIONED MOTOR VEHICLE, DID WILLFULLY AND UNLAWFULLY COMMIT THE OFFENSE OF:									
(CHECK ONLY ONE OFFENSE EACH TICKET)									
<input type="checkbox"/> S92 Speeding		<input checked="" type="checkbox"/> B04 Seatbelt Violation							
<input type="checkbox"/> M14 Disregard For Traffic Device		<input type="checkbox"/> B51 No Drivers License (Expired)							
<input type="checkbox"/> N70 Driving Wrong Side Road		<input type="checkbox"/> B53 No Motor Vehicle Inspection (Expired)							
<input type="checkbox"/> B26 Driving While License Suspended		<input type="checkbox"/> B53 Expired Tag/No Tag							
<input type="checkbox"/> M34 Following Too Closely		<input type="checkbox"/> B26 Driving While License Suspended (Under Implied Consent Law)							
<input type="checkbox"/> M70 Improper Passing		<input type="checkbox"/> M84 Reckless Driving							
<input type="checkbox"/> N81 Failure to Yield Right Of Way		<input type="checkbox"/> M81 Careless Driving							
<input type="checkbox"/> Other Violation - (Code Section _____)		<input type="checkbox"/> N50 Improper Turn							
		<input type="checkbox"/> B36 No Proof Of Liability Ins.							
Explanation: _____									
<input type="checkbox"/> Check Only If Driver License Is Deposited In Lieu Of Bond Or Other Security.									
<input type="checkbox"/> Violation Pursuant To Commercial Driver's License Law									
<input type="checkbox"/> Required Placard Under Hazardous Materials Transportation Act									
Against the peace and dignity of the State of Mississippi.									
Affiant / Officer's Signature		Unit / Badge # 52							
Sworn to before me this the		Day of		August		(Year) 07			
		Clerk		Mickey Nick DC					
You are hereby notified to appear before or contact the (Justice/Municipal) court clerk on or before the 31 day of Aug (Year) 07 At AM/PM at									
Address: 2961 SOUTH LIBERTY ST. CANTON, MS 39046									
Telephone Number 601-859-6337									
(This copy must be filed with the Court or Court Clerk)									
ORIGINAL / AFFIDAVIT Case _____ Page _____ Docket _____									

Mitchell, Antonio

P/P

Judge: 4

Case No.(s): _____

Arraignment Date: _____

Bond: _____

Defendant: Mitchell, Antonio

Address: _____

SS # _____ SL # _____

Phone # _____

Employer: _____

Phone # of Employer: _____

Supervisor: _____ Verified: _____

Charges: Poss of Marij in a motor vehicle

Affiant: Scott Graves Date Subpoenaed: _____

Other Witnesses:

Bonding Companies: _____ App. Date: 03/27/16 @ 9:00 A.M.

_____ Hearing Date: _____

_____ Continued to _____ for _____

_____ Continued to _____ for _____

_____ Continued to _____ for _____

Attorney: _____

Notes: _____

CASE NO MS CO 027076

JUDGE BRUCE MCKINLEY

CHARGE POSS OF MARIJUANA IN MOTOR VEHICLE

GENERAL AFFIDAVIT

THE STATE OF MISSISSIPPI

COUNTY OF MADISON

PERSONALLY APPEARED BEFORE ME STEPHANIE BURTON, DC
A JUSTICE COURT CLERK OF MADISON COUNTY,

GRAVES SCOTT DEPUTY SO30
2741 SOUTH LIBERTY ST
CANTON MS 39046-0000

MAKES AFFIDAVIT THAT

MITCHELL ANTONIO D
120 EMMIT RD
FLORA MS 39071-0000

ON OR ABOUT 12/03/2015 IN MADISON COUNTY, MISSISSIPPI

DID WILLFULLY, UNLAWFULLY, AND KNOWINGLY WHILE
OPERATING A MOTOR VEHICLE POSSESS IN HIS
PERSON AN AMOUNT OF IN EXCESS OF 1 GRAM BUT NOT
MORE THAN 30 GRAMS ON 12032015 AT KEARNEY PARK
RD AND MIDDLE RD IN FLORA, MS. THIS OCCURRING IN
MADISON COUNTY, MS.

AGAINST THE PEACE AND DIGNITY OF THE STATE OF MISSISSIPPI.

Scott Graves So30

SWORN TO AND SUBSCRIBED BEFORE ME, THIS THE 12/03/2015

Stephanie Burton DC
MADISON COUNTY JUSTICE COURT

2741 SOUTH LIBERTY, CANTON, MS 39046

MADISON COUNTY JUSTICE COURT

CASE RECORD OF STATE VERSUS MITCHELL ANTONIO D

CASE: MIS00-27078 CHARGE POSS OF MARIJUANA IN MOTOR VEHICLE

COURT DATE: 2/24/2016

MITCHELL ANTONIO D

AFFIANT/WITNESS:

ATTORNEY FOR DEF: Defendant waived rights to attorney

BOND: 600.00 AC BAILBOND

JAIL RCPT#

APPEAL BOND:

O R D E R

DEFENDANT IS FOUND: GUILTY PLEA

SENTENCE:

FINE \$ 350.00 COSTS \$ 208.75 TOTAL \$ 558.75

SO ORDERED, THIS THE 24th DAY OF February, 2016

DOC. 4648

PAGE 65

BY:

Brian McLean
JUSTICE COURT JUDGE

CASE: MIS00027078 VIOLATION DATE: 12/03/2015 DATE CLOSED:

IN THE JUSTICE COURT OF MADISON COUNTY, MISSISSIPPI
STATE OF MISSISSIPPI
VERSUS
MITCHELL, ANTONIO D. CAUSE NO. MIS00027028

WAIVER OF RIGHTS AND ENTRY OF GUILTY PLEA

I, the undersigned defendant, desire to plead guilty to the charge(s) of POSS OF MARIJUANA IN MOTOR VEHICLE

I understand that by pleading guilty to these charges I will be found guilty and sentenced by the Court. The sentence may include a fine, restitution, court costs and/or imprisonment in jail.

I further understand that by entering this plea I am giving up certain rights.

I am giving up the right to a trial, to confront and cross-examine witnesses against me and to call and/or subpoena witnesses against me.

I am giving up the right to have a lawyer; I understand that if I cannot afford a lawyer, one may be appointed to represent me.

I am giving up the right to have the State prove the charges against me beyond a reasonable doubt.

I am giving up the right to a jury trial.

I further understand that if I am convicted of another crime, my guilty plea in this case could cause me to get a more severe penalty for that later crime.

I am giving up my right to object to the form and/or content of any testimony and evidence the State may introduce against me at a trial.

I understand that, if there was a trial, I would be allowed to testify, but I would not have to. If I didn't testify it could not be used against me.

I hereby certify under oath that there have been no threats or promises made to me in order to get me to enter this plea.

I further certify under oath that I have read and understand all the of the above and that I desire to waive my rights and enter a plea of guilty.

SWORN to and subscribed before me this, the 24th day of February, 2016

Bruce McKinley
JUSTICE COURT JUDGE/CLERK

The Court finds that the defendant knowingly and intelligently and not under duress, waived his rights and entered a plea of guilty.

BRUCE MCKINLEY
JUSTICE COURT JUDGE

Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: MITCHELL ANTONIO D
120 EMMIT RD
FLORA MS 39071

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI Date: 12/14/2015
vs: Cause No: MIS 00-027078
MITCHELL ANTONIO D
RE: POSS OF MARIJUANA IN MOTOR VEHICLE

This is to notify you that the above styled case has been set for
INITIAL APPEARANCE on the 24th day of February A. D. 2016
at 9:00 AM. Your attendance is required.
BRUCE MCKINLEY presiding.



Susan McCarty, Clerk
Madison County Justice Court

By: _____

Shelia Taylor, DC DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS OR DEBIT CARDS OR ATM CARDS



<p>Only the original Power of Attorney will bind the surety</p>	<p>POWER OF ATTORNEY AC BAILBOND COMPANY LLC 201 TRAVIS COVE FLORA, MS 39071 (601) 940-8776</p>	<p>POWER NUMBER AC 0640</p>
<p>THIS POWER VOID IS NOT USED BY: DEC 30-2018</p>		
<p>KNOW ALL MEN BY THESE PRESENTS, that AC BAILBOND COMPANY LLC a corporation duly organized and existing under the law of the state of Mississippi, has constituted and appointed, and does hereby constitute and appoint, its true and lawful Attorney-in-Fact, with full power and authority to sign the company's name and affix its corporate seal to, and to deliver on its behalf as surety, any and all obligations as herein provided and the execution of such obligations in pursuance of these presents shall be as binding upon the company as fully and to all intents and purposes as if done by the regularly elected officers of said company at its home office in their own proper person; and the said company hereby ratifies and confirms all and whatsoever its said Attorney-in-Fact may lawfully do the premises by virtue of these presents.</p>		
<p>THIS POWER OF ATTORNEY IS VOID IF ALTERED OR ERASED, THE OBLIGATION OF THE COMP, ANY SHALL NOT EXCEED THE SUM OF \$0,000 FIFTY THOUSANDS DOLLARS *****</p>		
<p>AND MAY BE EXECUTED FOR RECOGNIZANCE ON CRIMINAL BAIL BOND ONLY</p>		
<p>Authority of such Attorney-in-Fact is limited to the execution of appearance bonds and cannot be construed to guarantee defendant's future lawful conduct adherent to travel limitation, fines, restitution, payments or penalties, or any other condition imposed by court not specifically related to court appearances. A separate Power of Attorney must be attached to each bond executed. Powers of Attorney must not be returned to Attorney-in-Fact, but should remain permanent part of the court records.</p>		
<p>Bond Amount \$ <u>600.00</u> Date Executed <u>December 3, 2015</u></p>	<p>NOTICE: Stacking of Power is strictly prohibited. No more than one power from this surety may be used to post anyone bail amount.</p>	
<p>Defendant <u>Antonio Mitchell</u> D.O.B. _____</p>	<p>IN WITNESS WHEREOF, said AC BAILBOND COMPANY LLC, by virtue of authority conferred by its Board of Directors, has caused these presents to be sealed with its corporate seal signed by the chairman of the Board of Director and attested by its PRESIDENT, this 8th day of May 2015.</p>	
<p>Case # _____ Appearance Date _____</p>	<p><i>Andrew Camphor</i> ANDREW CAMPHOR CHAIRMAN OF THE BOARD</p>	
<p>Offense <u>Poss. of Marijuana in Motor Vehicle</u></p>	<p><i>Lisa Camphor</i> LISA CAMPHOR VICE CHAIRMAN OF THE BOARD</p>	
<p>Court County <u>Madison</u> Court State <u>MS</u> Day/Dep. <u>Justice</u></p>	<p></p>	
<p>Court City <u>Canton</u></p>	<p></p>	
<p>If rewrite, give orig. power to _____ Increase _____ Decrease _____</p>	<p>150012346</p>	
<p>Executing Agent <u>Paul W. May Jr.</u> <small>SIGNATURE APPLICABLE TO YOUR COURT ASSIGNED AGENT</small></p>	<p>ORIGINAL</p>	

A. C. Bail Bonding



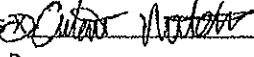
STATE OF MISSISSIPPI

COUNTY OF Madison

Power# AC 0640

We, Antonio Mitchell Principal, and A.C. Bail Bonding Company LLC, Agree and bind ourselves to pay unto the State of Mississippi Six hundred Dollars (\$ 600.00) unless, the said Antonio Mitchell shall not appear before the Justice court of Madison county in the City of Canton the day of 2015 time to answer the charge of Poss. of Marijuana in Motor Vehicle then and there remain from day to day remanded to files in the court having jurisdiction in the matter.

Written Day of the Bond 3 day of December 2015

Principal's 
Approved By

ATTORNEY-IN-FACT (SURETY) ANDREW CAMPHOR
207 TRAVIS COVE
FLORA, MS 39071

Approved This 14th Day of May 2015

**CERTIFIED COPY
QUALIFYING POWER OF ATTORNEY**

AC109203

**FILED
THIS DAY****OCT 06 2015****LEE WESTBROOK
CIRCUIT CLERK**

KNOW ALL MEN BY THESE PRESENTS: AC Bail Bond Company, a Mississippi corporation having its principal office in the City of Flora, county of Madison, State of Mississippi, does hereby make constitute appoint

In the City of Canton County of Madison State of Mississippi with limited authority, its true and lawful Agent and Attorney-in-Fact, with full power and authority hereby conferred to sign, execute, acknowledge and deliver for and on its behalf as Surety, subject to the limitation as herein set forth, any and all papers and documents necessary or incidental to the making of Bail Bonds in Judicial Proceedings, whether criminal or civil; supersedes bonds, peace bonds, appeal bonds or any other kind of appearance bond in any State Court, County Court or Municipal Court, not to exceed the amount on any one bond of

***Two Hundred and Fifty Thousand Dollars & No/100 (\$250,000.00) ***
PROVIDED individual power of attorney be attached to each bond executed and REMAIN A PERMANENT PART OF THE COURT RECORD.

The acknowledgement and execution of any such document by the said Attorney-in-Fact shall be as binding upon this Company as if such bond has been executed and acknowledged by the regularly elected officers of this Company.

All authority conferred shall expire and terminate without notice at midnight on May 18, 2018 a Bail Bond Company further certifies that the following is a true and exact copy of a resolution of the Board of Directors of AC Bail Bond Company, duly adopted and now in force, to wit: All bonds of the Corporation shall be executed in the corporate name of the Company, by the President or Vice President, or by such other officers as the Board of Directors may authorize. The President or Vice President, Secretary, or any Assistant Secretary may appoint Attorneys-in-Fact or agents who shall have authority to issue bonds in the name of the Company. The Corporate Seal is not necessary for the validity of any bonds of the Corporation.

IN WITNESS WHEREOF, the AC Bail Bond Company has caused these presents to be executed by its Officers this day of Sept. 25, 2015

AC BAIL BOND COMPANY

By: Andrew Camphor
Andrew Camphor

State of Mississippi
County of Madison

On the date above written, before me, a Notary Public, personally

appeared Andrew Camphor, who being by me duly

sworn, acknowledged that he signed the above Power of Attorney of the said AC Bail Bond Company and acknowledged to be the voluntary act and deed of said corporation



My commission

Dennis A. Shields
Notary Public

MITCHELL ANTONIO D.

Judge

Case No. (s)

Arrangement Date

Room

Defendant

Address

SSN

Phone

Employer

Phone of Employer

Supervisor

Verified

Charges

Arrest

Affiant

Subpoenaed

Other Witnesses

Bonding Companies

App. Date

Hearing Date

Continued to for

Continued to for

Continued to for

Attorney

Notes

STATE OF MISSISSIPPI - UNIFORM TRAFFIC TICKET									
IN THE COURT DESIGNATED BELOW, THE AFFRANT HEREBY, BEING DULY SWORN, UPON OATH DOES DEPOSE AND SAY AT THE FOLLOWING LOCATION, TIME AND DATE:									
MISSISSIPPI HIGHWAY SAFETY PATROL					AGENCY CODE		RIGHT OF WAY TICKET NUMBER		
JUDICIAL DISTRICT <input type="checkbox"/> 1 <input type="checkbox"/> 2					9045		9 1980966		
LOCATION OF VIOLATION									
LAKE HARBOR, FLORIDA									
DAY	DATE	TIME	ACCIDENT	DISTRICT	PRECINCT				
TUE	10-18-11	11:15	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	01	C				
DEFENDANT (FIRST NAME, MIDDLE NAME, LAST NAME)									
ANTONIO D MITCHELL									
LICENSE ADDRESS									
120 EMMIT ROAD									
CITY STATE ZIP CODE									
FLORA MS 39071									
DRIVER'S LICENSE NUMBER									
801696213									
CLASS (STATE) SEX RACE BIRTH DATE									
RA MS M B									
VEHICLE LICENSE NUMBER STATE YEAR MAKE MODEL TYPE									
B N 3487 MS 11 HONDA ACCORD PC									
Defendant's current address									
SAA									
Defendant's current telephone number									
THAT THE ABOVE NAMED DEFENDANT, WHILE OPERATING THE AFORESAID MOTOR VEHICLE, DID WILLFULLY AND UNLAWFULLY COMMIT THE OFFENSE OF:									
(Check Only One Offense Each Ticket)									
<input type="checkbox"/> 592 Speeding <input type="checkbox"/> M14 Disregard For Traffic Device <input type="checkbox"/> N70 Driving Wrong Side Road <input type="checkbox"/> B26 Driving While License Suspended <input type="checkbox"/> M34 Following Too Closely <input type="checkbox"/> M70 Improper Passing <input type="checkbox"/> N01 Failure to Yield Right Of Way <input type="checkbox"/> 637 Other Violation - (Code Section 63-7-23)									
<input type="checkbox"/> 102 Child Restraint Violation <input type="checkbox"/> F04 Seatbelt Violation <input type="checkbox"/> B51 No Drivers License (Expired) <input type="checkbox"/> B55 No Motor Vehicle Inspection (Expired) <input type="checkbox"/> B53 Expired Tag <input type="checkbox"/> B26 Driving While License Suspended (Under Implied Consent Law) <input type="checkbox"/> M84 Reckless Driving <input type="checkbox"/> M81 Careless Driving <input type="checkbox"/> N50 Improper Turn									
Explanation: <u>Improper lane change on veh.</u>									
<input type="checkbox"/> Check Only If Driver License Is Deposited In Lieu Of Bond Or Other Security. <input type="checkbox"/> Violation Pursuant To Commercial Driver's License Law <input type="checkbox"/> Required Under Hazardous Materials Transportation Act									
AGAINST THIS PLACE AND AGAINST THE STATE OF MISSISSIPPI.									
AFFRANT / OFFICER'S SIGNATURE <u>[Signature]</u> UNIT / BADGE <u>626</u>									
SWORN TO BEFORE ME THIS <u>12th</u> DAY OF <u>November</u> 20 <u>11</u>									
CLERK <u>[Signature]</u>									
You are hereby ordered to appear before the Court (JUDGE/MUNICIPAL) to answer the charge on the <u>25th</u> day of <u>Nov.</u> 20 <u>11</u> at <u>8:00 AM</u> at the Court's Physical Address _____									
Court's Mailing Address _____									
Court's Telephone Number _____									
NOTE: CONTACT THE COURT TO CONFIRM THE COURT DATE SEE REVERSE SIDE FOR ADDITIONAL INFORMATION									
(This copy must be filed with the Court or Court Clerk)									
ORIGINAL / AFFIDAVIT CASE _____ PAGE _____ DOC#KT _____									
07-09									

Judge: _____
Case No.(s): _____
Arraignment Date: _____
Bond: _____

Defendant: _____
Address: _____
SS #: _____ SI #: _____
Phone #: _____
Employer: _____
Phone # of Employer: _____
Supervisor: _____ Verified: _____

Charges: _____

Affiant: _____ Date Subpoenaed: _____

Other Witnesses: _____

Bonding Companies: _____ App. Date: _____
_____ Hearing Date: _____
_____ Continued to _____ for _____
_____ Continued to _____ for _____
_____ Continued to _____ for _____

Attorney: _____

Notes: _____

STATE OF MISSISSIPPI - UNIFORM TRAFFIC TICKET									
IN THE COURT DESIGNATED BELOW, THE AFFIANT HERIN, BEING DULY SWORN, UPON OATH DOES DEPOSE AND SAY AT THE FOLLOWING LOCATION, TIME AND DATE:									
MISSISSIPPI HIGHWAY SAFETY PATROL					AGENCY CODE		EIGHT DIGIT TICKET NUMBER		
COUNTY OF: <u>Madison</u>					90 <u>45</u>		9 <u>1721829</u>		
JUDICIAL DISTRICT <input type="checkbox"/> 1 <input type="checkbox"/> 2									
LOCATION OF VIOLATION					AT/NEAR		HWY		
<u>MS</u>					<u>Live View</u>		<u>49</u>		
DAY	DATE	TIME	ACCIDENT	DISTRICT	PRECINCT				
<u>Wed</u>	<u>9-29-10</u>	<u>2:00</u>	<input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<u>01</u>				
DEFENDANT: (FIRST NAME, MIDDLE NAME, LAST NAME)									
<u>Antonio D. Mitchell</u>									
LICENSE ADDRESS									
<u>120 Emmitt Rd</u>									
CITY		STATE		ZIP CODE					
<u>Flora</u>		<u>MS</u>		<u>39071</u>					
DRIVER'S LICENSE NUMBER					CLASS	STATE	SEX	RACE	DATE OF BIRTH
<u>301656213</u>					<u>R</u>	<u>MS</u>	<u>M</u>	<u>B</u>	
VEHICLE LICENSE NUMBER		STATE	YEAR	MAKE	MODEL	TYPE			
<u>MOF160</u>		<u>MS</u>	<u>11</u>	<u>Chrys</u>		<u>Van</u>			
Defendant's current address									
Defendant's current telephone number									
THAT THE ABOVE NAMED DEFENDANT, WHILE OPERATING THE AFOREMENTIONED MOTOR VEHICLE, DID WILLFULLY AND UNLAWFULLY COMMIT THE OFFENSE OF:									
(Check Only One Offense Each Ticket)									
<input checked="" type="checkbox"/> <u>32</u> <u>05</u> <input type="checkbox"/> <u>05</u> <input type="checkbox"/> <u>05</u> <input checked="" type="checkbox"/> M32 Speeding <input type="checkbox"/> F02 Child Restraint Violation <input type="checkbox"/> M14 Disregard For Traffic Device <input type="checkbox"/> F04 Seatbelt Violation <input type="checkbox"/> N70 Driving Wrong Side Road <input type="checkbox"/> B31 No Drivers License (Expired) <input type="checkbox"/> B26 Driving While License Suspended <input type="checkbox"/> B52 No Motor Vehicle Inspection (Expired) <input type="checkbox"/> M34 Following Too Closely <input type="checkbox"/> B53 Expired Tag <input type="checkbox"/> M70 Improper Passing <input type="checkbox"/> B26 Driving While License Suspended (Under Implied Consent Law) <input type="checkbox"/> N01 Failure To Yield Right Of Way <input type="checkbox"/> M84 Reckless Driving <input type="checkbox"/> Other Violation - (Code Section) <input type="checkbox"/> M81 Careless Driving <input type="checkbox"/> <input type="checkbox"/> D36 No Proof of Liability Insurance									
Explanation:									
<input type="checkbox"/> Check Only If Driver License Is Deposited In Lieu Of Bond Or Other Security. <input type="checkbox"/> Violation Pursuant To Commercial Driver's License Law <input type="checkbox"/> Required Placard Under Hazardous Materials Transportation Act.									
AGAINST THE PEACE AND DIGNITY OF THE STATE OF MISSISSIPPI									
AFFIANT / OFFICER'S SIGNATURE									
SWORN TO BEFORE ME THIS <u>29</u> DAY OF <u>Oct</u> 20 <u>10</u>									
(CLERK) <u>Courty Jackson</u>									
You are hereby notified to appear before the Court (JUDICIAL MUNICIPAL) to answer the charge on the <u>29</u> day of <u>Oct</u> 20 <u>10</u> <u>7:00</u> AM at the									
Court's Physical Address									
Court's Mailing Address									
Court's Telephone Number									
NOTE: CONTACT THE COURT TO CONFIRM THE COURT DATE SEE REVERSE SIDE FOR ADDITIONAL INFORMATION									
(This copy must be filed with the Court or Court Clerk)									
ORIGINAL / AFFIDAVIT CASH _____ PAID _____ UOCHKIT _____ 07-09									

Pate Earnest Lee

Judge: 2

Case No.(s): _____

Arraignment Date: _____

Bond: _____

Defendant: Pate Earnest Lee

Address: _____

SS # _____ SL # _____

Phone # _____

Employer: _____

Phone # of Employer: _____

Supervisor: _____ Verified: _____

Charges: Poss of Paraphernalia

Affiant: Agent Lee Brock Date Subpoenaed: _____

Other Witnesses:

Bonding Companies: _____ App. Date: 9/16/15 @ 9:00 A.M.

Hearing Date: _____

Continued to _____ for _____

Continued to _____ for _____

Continued to _____ for _____

Attorney: _____

Notes: _____

EXHIBIT

UU

GENERAL AFFIDAVIT

026957
2

THE STATE OF MISSISSIPPI

COUNTY OF MADISON

PERSONALLY APPEARED BEFORE ME

Russell Kirby A4 oc

A Justice Court Judge/Clerk of said County,

AGENT LEE BROCK

2935 HWY 51 South

Canton, Ms. 39046

Makes affidavit that:

EARNEST LEE PATE

Date of Birth

S.S.#

Address

117 COMPRESS ST

City

FLORA

State MS


Zip 39071

on or about JUNE 9TH, 2015 in the county aforesaid

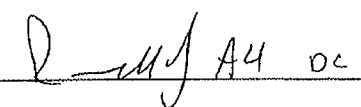
POSSESSION OF PARAPHERNALIA

**DID WILLFULLY AND UNLAWFULLY POSSESS WITH INTENT TO USE PARAPHERNALIA
TO INHALE BY HEATING IT UP WITH THE HOMEMADE PIPE AND COPPER WIRE TO
INTRODUCE INTO THE HUMAN BODY A CONTROLLED SUBSTANCE IN VIOLATION OF
THE UNIFORM CONTROLLED SUBSTANCE LAW.**

AGAINST THE PEACE AND DIGNITY OF THE STATE OF MISSISSIPPI.



Sworn to and subscribed before me, this 09th day of JUNE, 2015.

 A4 oc

Justice Court Judge/ Clerk

Madison County Justice Court

175 N. Union Street

Canton, Ms. 39046

STATE OF MISSISSIPPI
VERSUS
PATE EARNEST LEE

CAUSE NO. MIS00026457

WAIVER OF RIGHTS AND ENTRY OF GUILTY PLEA

I, the undersigned defendant, desire to plead guilty to the charge(s) of POSS OF PARAPHERNALIA

I understand that by pleading guilty to these charges I will be found guilty and sentenced by the Court. The sentence may include a fine, restitution, court costs and/or imprisonment in jail.

I further understand that by entering this plea I am giving up certain rights.

I am giving up the right to a trial, to confront and cross-examine witnesses against me and to call and/or subpoena witnesses against me.

I am giving up the right to have a lawyer; I understand that if I cannot afford a lawyer, one may be appointed to represent me.

I am giving up the right to have the State prove the charges against me beyond a reasonable doubt.

I am giving up the right to a jury trial.

I further understand that if I am convicted of another crime, my guilty plea in this case could cause me to get a more severe penalty for that later crime.

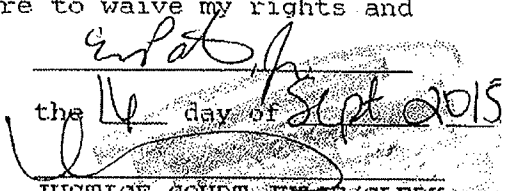
I am giving up my right to object to the form and/or content of any testimony and evidence the State may introduce against me at a trial.

I understand that, if there was a trial, I would be allowed to testify, but I would not have to. If I didn't testify it could not be used against me.

I hereby certify under oath that there have been no threats or promises made to me in order to get me to enter this plea.

I further certify under oath that I have read and understand all the of the above and that I desire to waive my rights and enter a plea of guilty.

SWORN to and subscribed before me this, the 14 day of Sept 2015


JUSTICE COURT JUDGE/CLERK

The Court finds that the defendant knowingly and intelligently and not under duress, waived his rights and entered a plea of guilty.

MARSHA WEEMS STACEY
JUSTICE COURT JUDGE

MADISON COUNTY JUSTICE COURT

CASE RECORD OF STATE VERSUS PATE EARNEST LEE

CASE: MIS00-26457 CHARGE POSS OF PARAPHERNALIA

COURT DATE: 9/16/2015

PATE EARNEST LEE

AFFIANT/WITNESS:

ATTORNEY FOR DEF: Defendant waived rights to attorney

BOND: 450.00 A&D

JAIL RCPT#

APPEAL BOND:

=====

ORDER

DEFENDANT IS FOUND: GUILTY PLEA

SENTENCE:

GUILTY PLEA. ORDERED TO 6 MONTHS OF PROBATION WITH COURT WATCH.

FINE \$ 100.00 COSTS \$ 183.75 TOTAL \$ 283.75

SO ORDERED, THIS THE 16 DAY OF Sept 2015

DOC. 3099 PAGE 213

BY: [Signature]
JUSTICE COURT JUDGE

CASE: MIS00026457

VIOLATION DATE:

DATE CLOSED:

Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: PATE EARNEST LEE
117 COMPRESS STREET
FLORA MS 39071

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 7/01/2015

vs:

Cause No: MIS 00-026457

PATE EARNEST LEE

RE: POSS OF PARAPHERNALIA

This is to notify you that the above styled case has been set for
INITIAL APPEARANCE on the 16th day of September A. D. 2015
at 9:00 AM. Your attendance is required.
MARSHA WEEMS STACEY presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

Shelia Taylor, DC

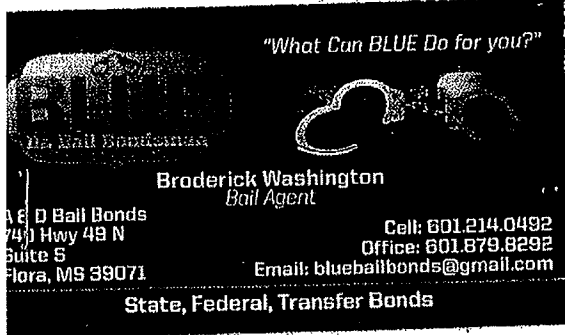
DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS OR DEBIT CARDS OR ATM CARDS

A&D BAIL BONDING COMPANY

② Set

TRUST, PATIENCE, RESPECT, FAITH, LOYALTY, HONEST, INTEGRITY, WORTHY, TIMELY, HUMBLE



AGENT: Broderick Washington

208 Travis Cove Flora, MS 39071

601-214-0492 / LS# 10176610

Power# LSK-375974

STATE OF MISSISSIPPI

COUNTY OF MADISON

We, EARNEST LEE PATE Principal, and International Fidelity Insurance Company A&D Bail Bonding Company, Agree and bind ourselves to pay unto the state of Mississippi Four hundred fifty Dollars (\$ 450.00) unless, the said EARNEST LEE PATE shall not appear before the Justice court of MADISON county in the City of Canton the 19 day of June of 20 15 time to answer the charge POSS. OF PARAPHERNALIA then and there remain from day to day remanded to files in the court having jurisdiction in the matter.

Written Day of the Bond 19 day of June 20 15

Principal's [Signature]

Approved By _____

(ATTORNEY-IN-FACT (SURETY) BENJAMIN WALLACE

APPROVED THIS 06TH DAY OF JUNE 2006

INTERNATIONAL FIDELITY INSURANCE COMPANY P.O. BOX 9810 CALABASAS, CA 91302

BENJAMIN WALLACE

553 HAZELTON DR.

MADISON, MS 39110

601-879-8292 OR 601-879-9151 (FAX)

TELEPHONE 1(818)-222-4999

Certified Copy

QUALIFYING POWER OF ATTORNEY

IQP 87898

KNOW ALL MEN BY THESE PRESENTS: That INTERNATIONAL FIDELITY INSURANCE COMPANY, a New Jersey Corporation, having principal office in the City of Newark, County of Essex, State of New Jersey, does hereby make constitute and appoint

Broderick D. Washington / Benjamin Wallace

SEP 10 2013

in the City of Canton, County of Madison, State of Mississippi, with limited authority, its true and lawful Agent and Attorney-in-Fact, with full power and authority hereby conferred to sign, execute, acknowledge and deliver for and on its behalf as Surety, subject to the limitation as herein set forth, any and all papers and documents necessary or incidental making of Bail Bonds in Judicial Proceedings, whether criminal or civil; supersedeas bonds, peace bonds, appeal bonds or any other kind of appeal bond in any State Court, County Court or Municipal Court, and in all U.S. Federal Courts and all U.S. Federal Agencies, not to exceed the amount of Two Hundred Fifty Thousand Dollars and 00/100 (\$250,000.00) on any one bond.

PROVIDED individual power of attorney be attached to each bond executed AND REMAIN A PERMANENT PART OF THE COURT RECORD.

The acknowledgement and execution of any such document by the said Attorney-in-Fact shall be as binding upon this Company as if such bond had been executed and acknowledged by the regularly elected officers of this Company.

All authority hereby conferred shall expire and terminate without notice at midnight on September 30, 2013. INTERNATIONAL FIDELITY INSURANCE COMPANY further certifies that the following is a true and exact copy of a resolution of the Board of Directors of INTERNATIONAL FIDELITY INSURANCE COMPANY, duly adopted and now in force, to-wit: All bonds of the Corporation shall be executed in the corporate name of the Company by the President or Vice-President, or by such other officers as the Board of Directors may authorize. The President or Vice-President, Secretary or any Assistant Secretary may appoint Attorneys-in-Fact or agents who shall have authority to issue bonds in the name of the Company. The Corporate Seal is not necessary for the validity of any bonds of the Corporation.

IN WITNESS WHEREOF, the said INTERNATIONAL FIDELITY INSURANCE COMPANY has caused these presents to be executed by its officers this day of August 16, 2013.

QUALIFYING POWER ONLY, NOT TO BE ATTACHED TO ANY BOND.

VALID ONLY IF INDIVIDUAL POWER OF ATTORNEY IS ATTACHED TO EACH BOND EXECUTED. DO NOT ACCEPT IF COPY

State of NEW JERSEY

County of ESSEX

ss.

On the date above written, before me, a Notary Public, personally appeared NORMAN R. KONWITZ, who being by me duly sworn, acknowledged that he signed the above Power of Attorney as Exec. Vice-President of the said INTERNATIONAL FIDELITY INSURANCE COMPANY and acknowledged said instrument to be the voluntary act and deed of said corporation.

Angeli Guerrero
Notary Public

My Commission Expires September 16, 2013

by Norman Konwitz, EXECUTIVE VICE PRESIDENT

Angeli Guerrero
Notary Public

FD-106 (5-01)

WARNING - ACCEPT ONLY IF YOU MAY VERIFY THAT THIS IS AN ORIGINAL DOCUMENT

1. THE FACE OF THIS FORM IS PRINTED IN BLACK AND BLUE INKS WITH A SHADED BACKGROUND.
2. THIS PAPER CONTAINS A TRUE WATERMARK. HOLD UP TO A LIGHT TO SEE THE WORDS "SAFE" AND "VERIFY FIRST" IN THE PAPER.

<p>Only the original Power of Attorney will bind this Surety.</p>	<p>POWER OF ATTORNEY</p> <p>IN "NATIONAL FIDELITY INSURANCE COMPANY P.O. BOX 9810, CALABASAS, CA 91372-9810 (800) 935-2245</p>	<p>POWER NUMBER IS1K-375974</p>
<p>THIS POWER VOID IF NOT USED BY: August 31, 2015</p>		<p>POWER AMOUNT \$ 1,100</p>
<p>KNOW ALL MEN BY THESE PRESENTS, that INTERNATIONAL FIDELITY INSURANCE COMPANY, a corporation duly organized and existing under the laws of the State of New Jersey, has constituted and appointed, and does hereby constitute and appoint, its true and lawful Attorney-in-Fact, with full power and authority to sign the company name and affix its corporate seal to, and deliver on its behalf as surety, any and all obligations as herein provided, and the execution of such obligations in pursuance of the presents shall be as binding upon the company as fully and to all intents and purposes as if done by the regularly elected officers of said company at its home office in its own proper person, and the said company hereby ratifies and confirms all and whatsoever its said Attorney-in-Fact may lawfully do and perform in the premises by virtue of these presents.</p>		
<p>THIS POWER OF ATTORNEY IS VOID IF ALTERED OR ERASED, THE OBLIGATION OF THE COMPANY SHALL NOT EXCEED THE SUM OF ONE THOUSAND ONE HUNDRED DOLLARS *****</p>		
<p>AND MAY BE EXECUTED FOR RECOGNIZANCE ON CRIMINAL BAIL BONDS ONLY.</p>		
<p>Authority of such Attorney-in-Fact is limited to the execution of appearance bonds and cannot be construed to guarantee defendant's future lawful conduct, adherence to trial limitation, fines, restitution, payments or penalties, or any other condition imposed by a court not specifically related to court appearances. A separate Power of Attorney may be attached to each bond executed. Powers of Attorney must not be returned to Attorney-in-Fact, but should remain a permanent part of the court records.</p>		
<p>Bond Amt \$ <u>450.00</u> Date Executed <u>June 19, 2015</u></p>	<p>NOTICE: Stacking of Powers is strictly prohibited. No more than power from this Surety may be used to post any one bail amount.</p>	
<p>Defendant <u>Earnest Lee Pate</u> D.O.B. _____</p>	<p>IN WITNESS WHEREOF, said INTERNATIONAL FIDELITY INSURANCE COMPANY, by virtue of authority conferred by Board of Directors, has caused these presents to be sealed with corporate seal, signed by its Chairman of the Board and attested by its Secretary, this 23rd day of March, 1998.</p>	
<p>Case # _____ Appearance Date _____</p>	<p><i>Frederic Millerhoff, Chairman of the Board</i></p>	
<p>Offense <u>Poss. of Paraphernalia</u></p>	<p><i>Norman Korwitz, Secretary</i></p>	
<p>Court County <u>MADISON</u></p>	<p>1904</p>	
<p>Court City <u>Canton</u> Court State <u>MS</u> Div./Dept. <u>Justice</u></p>	<p>NOT VALID FOR IMMIGRATION</p>	
<p>If rewrite, give orig. power # _____ <input type="checkbox"/> Increase <input type="checkbox"/> Decrease</p>	<p>02110131</p>	
<p>Executing Agent <u>Philip King</u> Signature if applicable, add your COURT assigned Agent # _____</p>	<p>ORIGINAL</p>	
<p>Form# IF1.0100 (9/06)</p>	<p>02110131</p>	

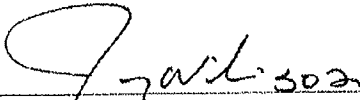
LaToya Brown, et al. vs. Madison County, Mississippi, et al.
United States District Court
Southern District of Mississippi
Civil Action No. 3:17-CV-347-WHB-LRA

AFFIDAVIT OF RECORDS CUSTODIAN

I, Chief Jeremy Williams, am the duly authorized custodian of the Madison County Sheriff's Department's records on **Delores Smith**, and as such have the authority to certify the attached records. The records attached hereto constitute a true and correct copy of the incident reports dated: April 18, 2004, June 26, 2004, August 21, 2004, February 19, 2006, March 20, 2006, October 22, 2006, December 19, 2007, April 22, 2009, May 29, 2010, October 18, 2010, May 3, 2014, June 15, 2014, September 24, 2015, April 2, 2016, December 18, 2016, April 5, 2017, and November 26, 2017. The attached records were prepared by the personnel of **Madison County Sheriff's Department**, or person acting under the control of either, in the ordinary course of business.

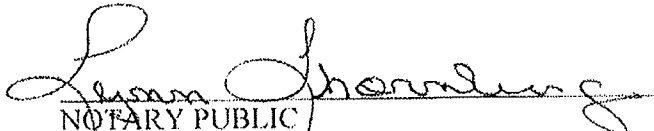
And further affiant saith not.

By:



Chief Jeremy Williams

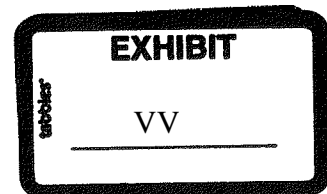
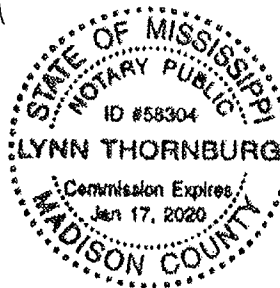
SWORN TO AND SUBSCRIBED before me, this the 3rd day of May,
2018.



NOTARY PUBLIC

My Commission Expires:

01/17/20





MADISON COUNTY SO
2941 U.S. Highway 51
Canton, MS 39046
Sheriff Randall Tucker
601-859-2345

INCIDENT REPORT

Incident Number SO04007582		Report Date 04/18/04		Report Time 17:12		Day of Week SUNDAY		Primary Officer ID# 1930 Z-FISHER, STAN S	
Received 17:12	Dispatched 17:14	Arrived 17:29	Cleared 17:39	Occurred Between the Dates/Times Of: 04/18/04 17:12 and: 04/18/04 17:12					
Address (House No, Dir, Street) 316 ROCKY HILL RD					City CANTON, MS			Address (Bldg, Unit, Apt) Bldg: Apt:	
Premise Type			Zone/Beat SUNDAY		Grid/Tract 1		Subdivision NON APPLICABLE		
Original Offense Description ARMED SUBJECT CALL			Actual Offense Description ARMED SUBJECT CALL			Weapons Involved UNKNOWN			
UCR Description			Attempt/Completed C		Forced Entry		Call Disposition HBO (HANDLED BY OFFICER)		
Additional Offenses					UCR Descriptions				
Additional Information/Comments CALLER ADVISED THAT HER BROTHER PULLED A GUN ON HER HUSBAND LEE ERVIN THOMAS									
Investigator Assigned					Status of the Incident				
Supervisor #1					Supervisor #2				

PERSONS INVOLVED

Person No 001	Involvement REPORTING PARTY			If Victim, Relationship to Offender (if applicable)				Confidential	
Name DELORIS SMITH				Race	Gender	HGT	WGT	Date of Birth 00/00/0000	
Age Then	Age Today 000	Hair	Eyes	Complexion		Build	Facial Hair		
Social Security 000 - 00 - 0000		Address				Telephone 00000 - 859 - 6616			
Employment			Work Address				Work Telephone 00000 - 000 - 0000		
Occupation				Driver's License					



MADISON COUNTY SO
2941 U.S. Highway 51
Canton, MS 39046
Sheriff Randall Tucker
601-859-2345

INCIDENT REPORT

Incident Number SO04012661	Report Date 06/26/04	Report Time 02:52	Day of Week SATURDAY	Primary Officer ID# 2547 HENDERSON, KIM
Received 02:52	Dispatched 02:52	Arrived 03:29	Cleared 03:42	Occurred Between the Dates/Times Of: 06/26/04 02:52 and: 06/26/04 02:52
Address (House No, Dir, Street) 274 CAMDEN RD		City PICKENS, MS		Address (Bldg, Unit, Apt) Bldg: Apt:
Premise Type	Zone/Beat SATURDAY	Grid/Tract 1	Subdivision NON APPLICABLE	
Original Offense Description DISTURBANCE	Actual Offense Description DISTURBANCE		Weapons Involved UNKNOWN	
UCR Description	Attempt/Completed C	Forced Entry	Call Disposition HBO (HANDLED BY OFFICER)	
Additional Offenses		UCR Descriptions		
Additional Information/Comments CELL PHONE CALLER STATES HIS WIFE IS IN A WHI CUT CIERRA AND IS GOING TO GET HER BROTHER TO BEAT HIM UP				
Investigator Assigned		Status of the Incident		
Supervisor #1		Supervisor #2		

PERSONS INVOLVED

Person No 001	Involvement REPORTING PARTY	If Victim, Relationship to Offender (if applicable)				Confidential
Name DELORIS SMITH		Race	Gender	HGT	WGT	Date of Birth 00/00/0000
Age Then	Age Today 000	Hair	Eyes	Complexion	Build	Facial Hair
Social Security 000 - 00 - 0000		Address			Telephone 00000 - 000 - 0000	
Employment		Work Address			Work Telephone 00000 - 000 - 0000	
Occupation		Driver's License				



MADISON COUNTY SO
2941 U.S. Highway 51
Canton, MS 39046
Sheriff Randall Tucker
601-859-2345

INCIDENT REPORT

Incident Number SO04016847		Report Date 08/21/04		Report Time 13:44		Day of Week SATURDAY		Primary Officer ID# 5493 WYMAN, CLINE H	
Received 13:44	Dispatched 13:44	Arrived 13:47	Cleared 14:32	Occurred Between the Dates/Times Of: 08/21/04 13:44 and: 08/21/04 13:44					
Address (House No, Dir, Street) 274 CAMDEN RD				City PICKENS, MS			Address (Bldg, Unit, Apt) Bldg: Apt:		
Premise Type			Zone/Beat SATURDAY		Grid/Tract 1		Subdivision NON APPLICABLE		
Original Offense Description BURGLARY			Actual Offense Description BURGLARY			Weapons Involved UNKNOWN			
UCR Description			Attempt/Completed C		Forced Entry		Call Disposition HBO (HANDLED BY OFFICER)		
Additional Offenses					UCR Descriptions				
Additional Information/Comments CALLER ADVISED ALBERT SMITH IS TRYING TO TAKE HER 1985 BROWN CHEVROLET CELEBRITY.									
Investigator Assigned					Status of the Incident				
Supervisor #1					Supervisor #2				

PERSONS INVOLVED

Person No 001	Involvement REPORTING PARTY			If Victim, Relationship to Offender (if applicable)				Confidential	
Name DELORIS SMITH			Race	Gender	HGT	WGT	Date of Birth 00/00/0000		
Age Then	Age Today 000	Hair	Eyes	Complexion		Build	Facial Hair		
Social Security 000 - 00 - 0000		Address				Telephone 00000 - 954 - 9027			
Employment			Work Address			Work Telephone 00000 - 000 - 0000			
Occupation					Driver's License				



MADISON COUNTY SO
2941 U.S. Highway 51
Canton, MS 39046
Sheriff Randall Tucker
601-859-2345

INCIDENT REPORT

Incident Number SO06003473	Report Date 02/19/06	Report Time 18:14	Day of Week SUNDAY	Primary Officer ID# 1737 Z-DIXON, MICHAEL A
Received 18:14	Dispatched 18:22	Arrived 18:47	Cleared 19:23	Occurred Between the Dates/Times Of: 02/19/06 18:14 and: 02/19/06 18:14
Address (House No, Dir, Street) 336 ROCKY HILL RD		City CANTON, MS		Address (Bldg, Unit, Apt) Bldg: Apt:
Premise Type RESIDENCE/HOME		Zone/Beat NORTH	Grid/Tract 1	Subdivision NON APPLICABLE
Original Offense Description DISTURBANCE-DOMESTIC VIOLENCE		Actual Offense Description MALICIOUS MISCHIEF		Weapons Involved UNKNOWN
UCR Description VANDALISM/DAMAGE	Attempt/Completed C	Forced Entry	Call Disposition REPORT FILED	
Additional Offenses		UCR Descriptions		
Additional Information/Comments CALLER ADVISED TYRON WILSON				
Investigator Assigned		Status of the Incident		
Supervisor #1		Supervisor #2		

PERSONS INVOLVED

Person No 001	Involvement REPORTING PARTY	If Victim, Relationship to Offender (if applicable)				Confidential
Name ALBERT SMITH		Race B	Gender M	HGT	WGT	Date of Birth 99/99/1999
Age Then	Age Today 000	Hair	Eyes	Complexion	Build	Facial Hair
Social Security 000 - 00 - 0000		Address			Telephone 00000 - 919 - 6125	
Employment		Work Address			Work Telephone 00000 - 000 - 0000	
Occupation		Driver's License				

Person No 002	Involvement VICTIM-INDIVIDUAL	If Victim, Relationship to Offender (if applicable)				Confidential
Name DELOURIS SMITH		Race B	Gender F	HGT	WGT	Date of Birth 99/99/1999
Age Then	Age Today 000	Hair	Eyes	Complexion	Build	Facial Hair
Social Security		Address 326 ROCKY HILL RD PICKENS MS			Telephone 60100 - 919 - 6125	
Employment		Work Address			Work Telephone 00000 - 000 - 0000	

Occupation				Driver's License			
Person No 003	Involvement SUSPECT		If Victim, Relationship to Offender (if applicable)				Confidential
Name TYRONE WILSON			Race B	Gender M	HGT	WGT	Date of Birth 99/99/1999
Age Then 27	Age Today 000	Hair	Eyes	Complexion	Build	Facial Hair	
Social Security 000 - 00 - 0000		Address 326 ROCKY HILL RD CAMDEN MS			Telephone 60100 - 919 - 6125		
Employment			Work Address			Work Telephone 00000 - 000 - 0000	
Occupation				Driver's License			

Person No 004	Involvement SUSPECT		If Victim, Relationship to Offender (if applicable)				Confidential
Name TEQUILLA HARRIS			Race B	Gender F	HGT	WGT	Date of Birth 99/99/1999
Age Then 27	Age Today 000	Hair	Eyes	Complexion	Build	Facial Hair	
Social Security 000 - 00 - 0000		Address HARRIS RD MS			Telephone 00000 - 000 - 0000		
Employment			Work Address			Work Telephone 00000 - 000 - 0000	
Occupation				Driver's License			

VEHICLES INVOLVED

Vehicle No 001	Vehicle Involvement SUSPECT	Year 1992	Make OLDSMOBILE	Model CIE	Style PASSENGER	
Serial Number 1G3QL543N6395410		Color (Top and Bottom) WHITE WHITE			Plate MS 162MCJ	Expires 06
Registered Owner			Legal Owner DELOURIS SMITH			
Comments						
Addl Comments						



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INCIDENT REPORT

Incident Number SO06005586	Report Date 03/20/06	Report Time 22:36	Day of Week MONDAY	Primary Officer ID# 800 BROCK, WILLIAM L
Received 22:36	Dispatched 22:37	Arrived 22:57	Cleared 02:07	Occurred Between the Dates/Times Of: 03/20/06 22:36 and: 03/20/06 22:36
Address (House No, Dir, Street) 326 ROCKY HILL RD		City CANTON, MS		Address (Bldg, Unit, Apt) Bldg: Apt:
Premise Type RESIDENCE/HOME	Zone/Beat NORTH	Grid/Tract 1	Subdivision NON APPLICABLE	
Original Offense Description DISTURBANCE-FAMILY	Actual Offense Description DISTURBANCE-DOMESTIC VIOLENCE		Weapons Involved NONE	
UCR Description ASSAULT-SIMPLE	Attempt/Completed C	Forced Entry	Call Disposition ARREST MADE	
Additional Offenses		UCR Descriptions		
Additional Information/Comments CALLER ADVISED THAT HER HUSBAND ALBERT SMITH IS MAKING ALBERT SMITH IN CUSTODY 2312				
Investigator Assigned		Status of the Incident		
Supervisor #1		Supervisor #2		

PERSONS INVOLVED

Person No 001	Involvement VICTIM-INDIVIDUAL	If Victim, Relationship to Offender (if applicable)				Confidential
Name DELORIS SMITH		Race B	Gender F	HGT	WGT	Date of Birth
Age Then 044	Age Today 056	Hair	Eyes	Complexion	Build	Facial Hair
Social Security		Address 326 ROCKY HILL RD CAMDEN MS			Telephone 60100 - 919 - 6125	
Employment		Work Address			Work Telephone 00000 - 000 - 0000	
Occupation		Driver's License				



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INCIDENT REPORT

Incident Number SO06019844	Report Date 10/22/06	Report Time 20:12	Day of Week SUNDAY	Primary Officer ID# 2258 GRAVES, ROBERT SCOTT
Received 20:12	Dispatched 20:18	Arrived 20:41	Cleared 21:16	Occurred Between the Dates/Times Of: 10/22/06 20:12 and: 10/22/06 20:12
Address (House No, Dir, Street) 326 ROCKY HILL RD		City CANTON, MS		Address (Bldg, Unit, Apt) Bldg: Apt:
Premise Type RESIDENCE/HOME	Zone/Beat NORTH	Grid/Tract 1	Subdivision NON APPLICABLE	
Original Offense Description DISTURBANCE-FAMILY	Actual Offense Description DISTURBANCE-OF THE PEACE		Weapons Involved UNKNOWN	
UCR Description DISORDERLY CONDUCT	Attempt/Completed C	Forced Entry	Call Disposition REPORT FILED	
Additional Offenses		UCR Descriptions		
Additional Information/Comments ALBERT SMITH HAS ASSAULTED HIS FAMILY MEMBERS // BLUE SHORTS WITH WHITE STRIPES // AMR ON SCENE @ 2046 // MS-28 950MDK / 162MCJ / SO30 ADV SMITH ALBERT WILL LEAVING FOR THE NIGHT				
Investigator Assigned		Status of the Incident		
Supervisor #1		Supervisor #2		

PERSONS INVOLVED

Person No 001	Involvement REPORTING PARTY	If Victim, Relationship to Offender (if applicable)				Confidential
Name MARILYN WILSON		Race B	Gender F	HGT	WGT	Date of Birth 99/99/1999
Age Then	Age Today 000	Hair	Eyes	Complexion	Build	Facial Hair
Social Security 000 - 00 - 0000		Address			Telephone 60100 - 919 - 6125	
Employment		Work Address			Work Telephone 00000 - 000 - 0000	
Occupation		Driver's License				

Person No 002	Involvement VICTIM-INDIVIDUAL	If Victim, Relationship to Offender (if applicable)				Confidential
Name DELOURIS SMITH		Race B	Gender F	HGT	WGT	Date of Birth
Age Then 045	Age Today 056	Hair	Eyes	Complexion	Build	Facial Hair
Social Security		Address 326 ROCKY HILL RD PICKENS MS			Telephone 60100 - 919 - 6125	
Employment UNEMPLOYED		Work Address			Work Telephone 00000 - 000 - 0000	

Occupation				Driver's License			
Person No 003	Involvement SUSPECT		If Victim, Relationship to Offender (if applicable)				Confidential
Name ALBERT SMITH			Race B	Gender M	HGT 509	WGT 225	Date of Birth
Age Then 042	Age Today 053	Hair BLACK	Eyes BROWN	Complexion		Build	Facial Hair
Social Security		Address 326 ROCKY HILL RD PICKEN MS			Telephone 60100 - 919 - 6125		
Employment PECO FOODS			Work Address CANTON			Work Telephone 60100 - 855 - 5001	
Occupation				Driver's License			



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INCIDENT REPORT

Incident Number SO07022804		Report Date 12/19/07		Report Time 22:04		Day of Week WEDNESDAY		Primary Officer ID# 1727 DAVIS, RICHARD T III (BEAU)	
Received 22:04	Dispatched 22:04	Arrived 22:19	Cleared 22:50	Occurred Between the Dates/Times Of: 12/19/07 22:04 and: 12/19/07 22:04					
Address (House No, Dir, Street) 326 ROCKY HILL RD				City CANTON, MS		Address (Bldg, Unit, Apt) Bldg: Apt:			
Premise Type			Zone/Beat		Grid/Tract		Subdivision NON APPLICABLE		
Original Offense Description DISTURBANCE			Actual Offense Description DISTURBANCE			Weapons Involved UNKNOWN			
UCR Description			Attempt/Completed C		Forced Entry		Call Disposition HBO (HANDLED BY OFFICER)		
Additional Offenses					UCR Descriptions				
Additional Information/Comments CP ADV HER HUSBAND ALBERT SMITH JUMPED ON HER//BM WEARING SH WHT SHIRT AND PJ PANTS//SUB IN INTOX//									
Investigator Assigned					Status of the Incident				
Supervisor #1					Supervisor #2				

PERSONS INVOLVED

Person No 001	Involvement REPORTING PARTY		If Victim, Relationship to Offender (if applicable)				Confidential	
Name DELORIS SMITH			Race	Gender	HGT	WGT	Date of Birth 00/00/0000	
Age Then	Age Today 000	Hair	Eyes	Complexion		Build	Facial Hair	
Social Security 000 - 00 - 0000		Address				Telephone 00000 - 528 - 1266		
Employment			Work Address				Work Telephone 00000 - 000 - 0000	
Occupation				Driver's License				



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Sheriff Randall Tucker
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INCIDENT REPORT

Incident Number SO09006660	Report Date 04/22/09	Report Time 14:24	Day of Week WEDNESDAY	Primary Officer ID# 2258 GRAVES, ROBERT SCOTT
Received 14:24	Dispatched 14:25	Arrived 14:34	Cleared 15:07	Occurred Between the Dates/Times Of: 04/22/09 14:24 and: 04/22/09 14:24
Address (House No, Dir, Street) KING RANCH RD / KING RANCH CIR		City CANTON, MS		Address (Bldg, Unit, Apt) Bldg: Apt:
Premise Type HIGHWAY/ROAD/ALLEY		Zone/Beat 10-6 AT THE SO	Grid/Tract	Subdivision NON APPLICABLE
Original Offense Description ACCIDENT PROPERTY DAMAGE M/CAR		Actual Offense Description ACCIDENT W/INJURIES MULTI CAR		Weapons Involved UNKNOWN
UCR Description ALL OTHER OFFENSES		Attempt/Completed C	Forced Entry	Call Disposition REPORT FILED
Additional Offenses		UCR Descriptions		
Additional Information/Comments 10-50 INVOLVING HEAD START BUS UNKNOWN CROSS ON KING RANCH				
Investigator Assigned			Status of the Incident	
Supervisor #1			Supervisor #2	

PERSONS INVOLVED

Person No 001	Involvement DRIVER	If Victim, Relationship to Offender (if applicable)				Confidential
Name R L BROWN		Race B	Gender M	HGT	WGT	Date of Birth 06/06/1950
Age Then 058	Age Today 067	Hair	Eyes	Complexion	Build	Facial Hair
Social Security 000 - 00 - 0000		Address 181 IRVIN ROAD BENTONIA MS			Telephone 66200 - 528 - 8084	
Employment		Work Address DL MS 801 04 5502			Work Telephone 00000 - 000 - 0000	
Occupation		Driver's License				

Person No 002	Involvement OWNER	If Victim, Relationship to Offender (if applicable)				Confidential
Name L & B TRUCKING		Race X	Gender X	HGT	WGT	Date of Birth 99/99/1999
Age Then	Age Today 000	Hair	Eyes	Complexion	Build	Facial Hair
Social Security 000 - 00 - 0000		Address P.O. BOX 7558 JACKSON MS			Telephone 00000 - 000 - 0000	
Employment		Work Address			Work Telephone 00000 - 000 - 0000	

Occupation				Driver's License			
Person No 003	Involvement DRIVER			If Victim, Relationship to Offender (if applicable)			Confidential
Name CECIL BROWN				Race B	Gender F	HGT	WGT
Date of Birth							
Age Then 063	Age Today 072	Hair	Eyes	Complexion		Build	Facial Hair
Social Security 000 - 00 - 0000		Address 102 JADE COVE CANTON MS				Telephone 60100 - 361 - 0960	
Employment			Work Address DL MS 801 49 8627			Work Telephone 00000 - 000 - 0000	
Occupation				Driver's License			

Person No 004	Involvement PASSENGER			If Victim, Relationship to Offender (if applicable)			Confidential
Name DELOURIS SMITH				Race B	Gender F	HGT	WGT
Date of Birth 99/99/1999							
Age Then 47	Age Today 000	Hair	Eyes	Complexion		Build	Facial Hair
Social Security 000 - 00 - 0000		Address 326 ROCKY HILL ROAD PICKENS MS				Telephone 00000 - 000 - 0000	
Employment			Work Address			Work Telephone 00000 - 000 - 0000	
Occupation				Driver's License			

Person No 005	Involvement PASSENGER			If Victim, Relationship to Offender (if applicable)			Confidential
Name LATIA WILLIAMS				Race B	Gender F	HGT	WGT
Date of Birth 20/99/9999							
Age Then 05	Age Today 000	Hair	Eyes	Complexion		Build	Facial Hair
Social Security 000 - 00 - 0000		Address 1106 HOLMES AVE CANTON MS				Telephone 00000 - 000 - 0000	
Employment			Work Address			Work Telephone 00000 - 000 - 0000	
Occupation				Driver's License			

Person No 006	Involvement PASSENGER			If Victim, Relationship to Offender (if applicable)			Confidential
Name KEUNDRIA JOHNSON				Race B	Gender M	HGT	WGT
Date of Birth 20/99/9999							
Age Then 04	Age Today 000	Hair	Eyes	Complexion		Build	Facial Hair
Social Security 000 - 00 - 0000		Address 538 WASHINGTON STREET CANTON MS				Telephone 00000 - 000 - 0000	
Employment			Work Address			Work Telephone 00000 - 000 - 0000	
Occupation				Driver's License			

Occupation				Driver's License			
Person No 007	Involvement PASSENGER		If Victim, Relationship to Offender (if applicable)				Confidential
Name MONTRAYVIOUS CARTER			Race B	Gender M	HGT	WGT	Date of Birth 20/99/9999
Age Then 06	Age Today 000	Hair	Eyes	Complexion	Build	Facial Hair	
Social Security 000 - 00 - 0000		Address 327 WELCH STREET APT A CANTON MS			Telephone 00000 - 000 - 0000		
Employment		Work Address			Work Telephone 00000 - 000 - 0000		
Occupation				Driver's License			

Person No 008	Involvement PASSENGER		If Victim, Relationship to Offender (if applicable)				Confidential
Name FREDERICO MORRIS			Race B	Gender M	HGT	WGT	Date of Birth 20/99/9999
Age Then 05	Age Today 000	Hair	Eyes	Complexion	Build	Facial Hair	
Social Security 000 - 00 - 0000		Address 390 RICKS DR APT C CANTON MS			Telephone 00000 - 000 - 0000		
Employment		Work Address			Work Telephone 00000 - 000 - 0000		
Occupation				Driver's License			

Person No 009	Involvement PASSENGER		If Victim, Relationship to Offender (if applicable)				Confidential
Name DE'MARKEVION ROBINSON			Race B	Gender M	HGT	WGT	Date of Birth 20/99/9999
Age Then 05	Age Today 000	Hair	Eyes	Complexion	Build	Facial Hair	
Social Security 000 - 00 - 0000		Address 390 RICKS DR APT C CANTON MS			Telephone 00000 - 000 - 0000		
Employment		Work Address			Work Telephone 00000 - 000 - 0000		
Occupation				Driver's License			

Person No 010	Involvement PASSENGER		If Victim, Relationship to Offender (if applicable)				Confidential
Name JAKIEAH MCDONALD			Race B	Gender F	HGT	WGT	Date of Birth 20/99/9999
Age Then 05	Age Today 000	Hair	Eyes	Complexion	Build	Facial Hair	
Social Security 000 - 00 - 0000		Address 355 BOYD STREET APT A CANTON MS			Telephone 00000 - 000 - 0000		
Employment		Work Address			Work Telephone 00000 - 000 - 0000		
Occupation				Driver's License			

Occupation				Driver's License			
Person No 011	Involvement PASSENGER			If Victim, Relationship to Offender (if applicable)			Confidential
Name JAMARION BURKS				Race B	Gender M	HGT	WGT
						Date of Birth 20/99/9999	
Age Then 05	Age Today 000	Hair	Eyes	Complexion	Build	Facial Hair	
Social Security 000 - 00 - 0000		Address 315 WELCH STREET APT A CANTON MS				Telephone 00000 - 000 - 0000	
Employment			Work Address			Work Telephone 00000 - 000 - 0000	
Occupation				Driver's License			

Person No 012	Involvement PASSENGER			If Victim, Relationship to Offender (if applicable)			Confidential
Name CHRISTIAN JACKSON				Race B	Gender M	HGT	WGT
						Date of Birth 20/99/9999	
Age Then 04	Age Today 000	Hair	Eyes	Complexion	Build	Facial Hair	
Social Security 000 - 00 - 0000		Address 236 BOYD STREET CANTON MS				Telephone 00000 - 000 - 0000	
Employment			Work Address			Work Telephone 00000 - 000 - 0000	
Occupation				Driver's License			

Person No 013	Involvement OWNER			If Victim, Relationship to Offender (if applicable)			Confidential
Name FRIENDS OF CHILDREN				Race X	Gender X	HGT	WGT
						Date of Birth 99/99/1999	
Age Then	Age Today 000	Hair	Eyes	Complexion	Build	Facial Hair	
Social Security 000 - 00 - 0000		Address 454 TROLIO STREET CANTON MS				Telephone 00000 - 000 - 0000	
Employment			Work Address			Work Telephone 00000 - 000 - 0000	
Occupation				Driver's License			

VEHICLES INVOLVED

Vehicle No 001	Vehicle Involvement ACCIDENT	Year 1995	Make MACK TRUCKS	Model	Style DUMP TRUCK
Serial Number		Color (Top and Bottom) WHITE WHITE			Plate MS B485015
					Expires 09
Registered Owner			Legal Owner L&B TRUCKING		
Comments					
Addl Comments					

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Vehicle No 002	Vehicle Involvement ACCIDENT	Year 2002	Make FREIGHTLINER	Model TR	Style SCHOOL BUS
Serial Number		Color (Top and Bottom) YELLOW YELLOW		Plate MS SB3072	Expires 10
Registered Owner			Legal Owner FRIENDS OF CHILDREN		
Comments					
Addl Comments					



MADISON COUNTY SO
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Sheriff Randall Tucker
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INCIDENT REPORT

Incident Number SO10009371		Report Date 05/29/10		Report Time 16:39		Day of Week SATURDAY		Primary Officer ID# 4960 D-60 STRAIT, THOMAS	
Received 16:39	Dispatched 16:42	Arrived 17:07	Cleared 17:21	Occurred Between the Dates/Times Of: 05/29/10 16:39 and: 05/29/10 16:39					
Address (House No, Dir, Street) 326 ROCKY HILL RD				City CANTON, MS			Address (Bldg, Unit, Apt) Bldg: Apt:		
Premise Type RESIDENCE/HOME			Zone/Beat		Grid/Tract		Subdivision NON APPLICABLE		
Original Offense Description ASSAULT-HARASSING PHONE CALLS			Actual Offense Description INFORMATION ONLY			Weapons Involved NONE			
UCR Description ALL OTHER OFFENSES			Attempt/Completed C		Forced Entry N		Call Disposition REPORT FILED		
Additional Offenses					UCR Descriptions				
Additional Information/Comments CALLER ADVISE SOMEBODY HAD CALLED HER PHONE AND THREATENED H ER									
Investigator Assigned					Status of the Incident				
Supervisor #1 Z-MCNEAL, MARY A					Supervisor #2 Z-MCNEAL, MARY A				

PERSONS INVOLVED

Person No 001	Involvement CALLER		If Victim, Relationship to Offender (if applicable)				Confidential	
Name DELORIS SMITH			Race B	Gender F	HGT 508	WGT 190	Date of Birth	
Age Then 49	Age Today 056	Hair BLACK	Eyes BROWN	Complexion BLACK	Build MEDIUM	Facial Hair NOT APPLIC		
Social Security		Address 326 ROCKY HILL ROAD CAMDEN MS				Telephone 76900 - 233 - 4107		
Employment			Work Address			Work Telephone 00000 - 000 - 0000		
Occupation				Driver's License				

Person No 002	Involvement SUSPECT		If Victim, Relationship to Offender (if applicable)				Confidential	
Name PATRICIA GRIFFIN			Race B	Gender F	HGT 999	WGT 999	Date of Birth 99/99/9999	
Age Then 0	Age Today 000	Hair UNKNOWN	Eyes UNKNOWN	Complexion UNKNOWN	Build UNKNOWN	Facial Hair NOT APPLIC		
Social Security 999 - 99 - 9999		Address MS				Telephone 76900 - 000 - 0000		

Employment	Work Address	Work Telephone 00000 - 000 - 0000
Occupation	Driver's License	

NARRATIVE DATA

ON 05-28-10 I DEPUTY STRAIT WAS DISPATCHED TO 326 ROCKY HILL ROAD TO TAKE A REPORT ON HARASSING PHONE CALLS. WHEN I ARRIVED I MEET WITH DELOURIS SMITH WHO TOLD ME HER COUSIN IS CALLING HER AND THREATENING TO SHOOT HER BECAUSE SHE THINKS MRS. SMITH IS MESSING WITH HER BOYFRIEND. MRS. SMITH WAS NOT ABLE TO GIVE ME ANY OTHER INFORMATION THAT WOULD HELP IN THE INVESTIGATION. 326 ROCKY HILL ROAD IS NOT ON FILE...EOR



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INCIDENT REPORT

Incident Number SO10019256	Report Date 10/18/10	Report Time 15:47	Day of Week MONDAY	Primary Officer ID# 1990 Z-GAGNARD, ANTHONY C
Received 15:47	Dispatched 15:47	Arrived 15:54	Cleared 16:49	Occurred Between the Dates/Times Of: 10/18/10 15:47 and: 10/18/10 15:47
Address (House No, Dir, Street) 644 CHURCH RD		City MADISON, MS		Address (Bldg, Unit, Apt) Bldg: Apt:
Premise Type PARKING LOT	Zone/Beat 10-6 AT THE SO	Grid/Tract	Subdivision ALL OTHER	
Original Offense Description LARCENY	Actual Offense Description BURGLARY-AUTO	Weapons Involved UNKNOWN		
UCR Description LARCENY-LARCENY FR MOTOR VEH	Attempt/Completed C	Forced Entry	Call Disposition REPORT FILED	
Additional Offenses		UCR Descriptions		
Additional Information/Comments WAREHOUSE# 8 BEHIND JOHNSON CONTROL - R/P SUSPECTS JOHNNY VANCE HAS TAKEN MONEY FROM HER PURSE / COMPL IN WHI SUV				
Investigator Assigned		Status of the Incident		
Supervisor #1 Z-MCNEAL, MARY A		Supervisor #2 Z-MCNEAL, MARY A		

PERSONS INVOLVED

Person No 001	Involvement CALLER	If Victim, Relationship to Offender (if applicable)				Confidential
Name DELOURIS JEAN SMITH		Race B	Gender F	HGT 509	WGT 170	Date of Birth
Age Then 49	Age Today 056	Hair BLACK	Eyes BROWN	Complexion MEDIUM	Build MEDIUM	Facial Hair NOT APPLIC
Social Security		Address 326 ROCKY HILL RD PICKENS MS			Telephone 60100 - 497 - 9517	
Employment ANM SERVICES		Work Address 644 CHURCH RD			Work Telephone 00000 - 000 - 0000	
Occupation		Driver's License				

Person No 002	Involvement FIELD INTERVIEW	If Victim, Relationship to Offender (if applicable)				Confidential
Name JOHNNY LEE VANCE		Race B	Gender M	HGT 509	WGT 120	Date of Birth
Age Then 22	Age Today 030	Hair BLACK	Eyes BROWN	Complexion MEDIUM	Build SLIM	Facial Hair CLEAN SHAV
Social Security		Address 835 ACADEMY PARK DR CANTON MS			Telephone 60100 - 000 - 0000	

Employment ANM SERVICES	Work Address 644 CHURCH RD	Work Telephone 00000 - 000 - 0000
Occupation	Driver's License	

Person No 003	Involvement FIELD INTERVIEW	If Victim, Relationship to Offender (if applicable)				Confidential
Name CHRISTIE BYRD		Race B	Gender F	HGT 999	WGT 999	Date of Birth
Age Then 21	Age Today 028	Hair BLACK	Eyes BROWN	Complexion MEDIUM	Build MEDIUM	Facial Hair NOT APPLIC
Social Security		Address 619 JAMES ST CANTON MS		Telephone 60100 - 000 - 0000		
Employment ANM SERVICES		Work Address 644 CHURCH RD		Work Telephone 00000 - 000 - 0000		
Occupation		Driver's License				

PROPERTY INVOLVED

Article No 001	Property Involvement STOLEN	Make US CURRENCY	Model N/A	Serial Number N/A
Quantity 240	Color N/A	In House Description CASH, COINS, CU		UCR Description MONEY
Date / Value Stolen 10/18/10 \$240		Date / Value Recovered 00/00/00 \$0		Date / Value Damaged/Received 00/00/00 \$
Comments				

Article No 002	Property Involvement STOLEN	Make UNK	Model WALLET	Serial Number
Quantity 1	Color PINK AND BLACK	In House Description PURSE, WALLET,		UCR Description PURSES/HANDBAGS/WALL
Date / Value Stolen 10/18/10 \$20		Date / Value Recovered 00/00/00 \$0		Date / Value Damaged/Received 00/00/00 \$
Comments WALLET ALSO CONTAINED HER MS DRIVERS LICENSE, HER SS CARD, AND HER CHILDRENS SS CARDS.				

VEHICLES INVOLVED

Vehicle No 001	Vehicle Involvement VICTIM'S	Year 2000	Make ISUZU	Model RLL	Style PASSENGER
Serial Number 4S2CK58WXY4346840	Color (Top and Bottom) WHITE WHITE			Plate MS MCE378	Expires 11
Registered Owner DELOURIS SMITH			Legal Owner DELOURIS SMITH		
Comments					
Addl Comments					

NARRATIVE DATA

ON 10/18/10 I, DEPUTY GAGNARD, RESPONDED TO 644 CHURCH RD, ANM SERVICES WAREHOUSE NUMBER 8, IN REFERENCE TO AN AUTO BURGLARY. UPON ARRIVAL I SPOKE WITH THE COMPLAINANT, DELOURIS SMITH, WHO ADVISED THAT ON THIS DATE BETWEEN 1145 HOURS AND 1600 HOURS SOMEONE STOLE HER WALLET FROM HER VEHICLE. THE WALLET WAS PINK AND BLACK IN COLOR AND CONTAINED \$240.00 IN CASH, HER MS

DRIVERS LICENSE, HER SS CARD, AND HER CHILDRENS SS CARDS. SHE ADVISED ME THAT HER WALLET WAS INSIDE HER PURSE WHICH WAS SITTING ON THE FRONT PASSENGER SEAT OF HER VEHICLE, AND THAT THE VEHICLE DOORS WERE NOT LOCKED. SHE ADVISED ME THAT THE VEHICLE WAS SITTING IN THE PARKING LOT NEXT TO THE BUILDING AT THIS LOCATION. THE COMPLAINANT ADVISED ME THAT SHE, HER DAUGHTER, AND TWO OTHER WAREHOUSE WORKERS ALL WENT TO LUNCH IN HER CAR TODAY, AND THAT THE TWO OTHER WORKERS SAW THAT SHE HAD MONEY IN HER WALLET. THE OTHER TWO WORKERS WERE IDENTIFIED AS JOHNNY VANCE AND CHRISTIE BYRD. I SPOKE WITH BOTH OF THESE SUBJECTS SEPARATELY, AND BOTH OF THEM DENIED TAKING THE MONEY OR HAVING ANY KNOWLEDGE OF WHAT MIGHT HAVE HAPPENED TO THE MONEY. UPON FURTHER INVESTIGATION I LEARNED THAT JOHNNY VANCE HAS BEEN PREVIOUSLY ARRESTED BY CANTON PD FOR RECEIVING STOLEN PROPERTY. I DID ASK BOTH MR VANCE AND MS BYRD IF THEY WOULD VOLUNTARILY EMPTY THEIR POCKETS AND BOTH DID SO, BUT NO MONEY WAS DISCOVERED. THE COMPLAINANT WAS VERY ADAMANT THAT MR VANCE WAS INVOLVED IN THIS, BUT SHE WAS UNABLE TO PROVIDE ME WITH ANY PROOF OR EVIDENCE TO SUPPORT HER ACCUSATION. SHE WAS GIVEN A CASE CARD. END OF REPORT.



MADISON COUNTY SO
2941 U.S. Highway 51
Canton, MS 39046
Sheriff Randall Tucker
601-859-2345

INCIDENT REPORT

Incident Number SO14006905	Report Date 05/03/14	Report Time 17:30	Day of Week SATURDAY	Primary Officer ID# 2247 NEWSOME, NEWMAN
Received 17:30	Dispatched 17:39	Arrived 18:05	Cleared 18:21	Occurred Between the Dates/Times Of: 05/03/14 17:30 and: 05/03/14 17:30
Address (House No, Dir, Street) 0 NOT ON FILE		City PICKENS, MS		Address (Bldg, Unit, Apt) Bldg: Apt:
Premise Type HIGHWAY/ROAD/ALLEY		Zone/Beat 10-6 AT THE SO	Grid/Tract	Subdivision NON APPLICABLE
Original Offense Description ACCIDENT WITH ANIMAL		Actual Offense Description ACCIDENT WITH ANIMAL		Weapons Involved UNKNOWN
UCR Description ALL OTHER OFFENSES		Attempt/Completed C	Forced Entry	Call Disposition REPORT FILED
Additional Offenses		UCR Descriptions		
Additional Information/Comments VEH VS DEER //				
Investigator Assigned			Status of the Incident	
Supervisor #1 SMITH, GEORGE DARIAN			Supervisor #2 SMITH, GEORGE DARIAN	

PERSONS INVOLVED

Person No 001	Involvement CALLER	If Victim, Relationship to Offender (if applicable)				Confidential
Name ALBERT JONES		Race	Gender	HGT 000	WGT 000	Date of Birth 00/00/0000
Age Then	Age Today 000	Hair	Eyes	Complexion	Build	Facial Hair
Social Security 000 - 00 - 0000		Address			Telephone 00000 - 000 - 0000	
Employment		Work Address			Work Telephone 00000 - 000 - 0000	
Occupation		Driver's License				

Person No 002	Involvement VICTIM-COMPLAINANT	If Victim, Relationship to Offender (if applicable)				Confidential
Name DELOURIS JEAN SMITH		Race B	Gender F	HGT 509	WGT 170	Date of Birth
Age Then 52	Age Today 056	Hair BLACK	Eyes BROWN	Complexion FAIR	Build UNKNOWN	Facial Hair UNKNOWN
Social Security		Address 326 ROCKYHILL ROAD PICKENS MS			Telephone 00000 - 000 - 0000	
Employment		Work Address			Work Telephone 00000 - 000 - 0000	

Occupation	Driver's License MS802057721
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VEHICLES INVOLVED

Vehicle No 001	Vehicle Involvement ACCIDENT	Year 2002	Make DODGE	Model INTREPID	Style HARDTOP 4
Serial Number 2B3HD56M62H244234		Color (Top and Bottom) WHITE WHITE		Plate MS MAR244	Expires 15
Registered Owner DELOUIRS SMITH			Legal Owner SAME AS ABOVE		
Comments					
Addl Comments					

NARRATIVE DATA

On Saturday May 3, 2014 Deputy Bernard Newsome, Jr was dispatched to 326 Rocky Hill Road to speak with a complainant in reference to an accident involving a deer. Upon arrival Deputy Newsome came in contact with a b/f who was identified as Delouris J. Smith. Ms. Smith stated that around 5am or 6am she was traveling west on Loring Road when a deer ran into the driver's side area of vehicle, which caused minor damage. No further information End Of report.



MADISON COUNTY SO
 2941 U.S. Highway 51
 Canton, MS 39046
 Sheriff Randall Tucker
 601-859-2345

INCIDENT REPORT

Incident Number SO14009378	Report Date 06/15/14	Report Time 21:51	Day of Week SUNDAY	Primary Officer ID# 2705 JONES, ALBERT JR
Received 21:51	Dispatched 21:53	Arrived 22:09	Cleared 22:35	Occurred Between the Dates/Times Of: 06/15/14 21:51 and: 06/15/14 21:51
Address (House No, Dir, Street) 326 ROCKY HILL RD		City CANTON, MS		Address (Bldg, Unit, Apt) Bldg: Apt:
Premise Type	Zone/Beat	Grid/Tract	Subdivision ALL OTHER	
Original Offense Description DISTURBANCE-FAMILY		Actual Offense Description DISTURBANCE-FAMILY		Weapons Involved
UCR Description	Attempt/Completed C	Forced Entry	Call Disposition HBO (HANDLED BY OFFICER)	
Additional Offenses		UCR Descriptions		
Additional Information/Comments ALBERT SMITH / INTOXICATED / VERBAL , THEATENING TO JUMP ON HER				
Investigator Assigned		Status of the Incident		
Supervisor #1		Supervisor #2		

PERSONS INVOLVED

Person No 001	Involvement CALLER	If Victim, Relationship to Offender (if applicable)				Confidential
Name DELORIS SMITH		Race	Gender	HGT	WGT	Date of Birth 00/00/0000
Age Then	Age Today 000	Hair	Eyes	Complexion	Build	Facial Hair
Social Security 000 - 00 - 0000		Address			Telephone 60100 - 519 - 7796	
Employment		Work Address			Work Telephone 00000 - 000 - 0000	
Occupation		Driver's License				



MADISON COUNTY SO
2941 U.S. Highway 51
Canton, MS 39046
Sheriff Randall Tucker
601-859-2345

INCIDENT REPORT

Incident Number SO15015649	Report Date 09/24/15	Report Time 19:03	Day of Week THURSDAY	Primary Officer ID# 1165 CHANDLER, BARRY
Received 19:03	Dispatched 19:04	Arrived 19:18	Cleared 19:53	Occurred Between the Dates/Times Of: 09/24/15 19:03 and: 09/24/15 19:03
Address (House No, Dir, Street) 326 ROCKY HILL RD		City PICKENS, MS		Address (Bldg, Unit, Apt) Bldg: Apt:
Premise Type	Zone/Beat 10-6 AT THE SO	Grid/Tract	Subdivision NON APPLICABLE	
Original Offense Description DISTURBANCE-DISORDERLY CONDUCT		Actual Offense Description DISTURBANCE-DISORDERLY CONDUCT		Weapons Involved
UCR Description	Attempt/Completed C	Forced Entry	Call Disposition REPORT FILED	
Additional Offenses		UCR Descriptions		
Additional Information/Comments CALLER ADVISED HER STEP DAUGHTER IS TRYING TO FIGHT HER / LE AH SMITH 20				
Investigator Assigned		Status of the Incident		
Supervisor #1		Supervisor #2		

PERSONS INVOLVED

Person No 001	Involvement CALLER	If Victim, Relationship to Offender (if applicable)				Confidential
Name DELORES SMITH		Race	Gender	HGT	WGT	Date of Birth 00/00/0000
Age Then	Age Today 000	Hair	Eyes	Complexion	Build	Facial Hair
Social Security 000 - 00 - 0000		Address			Telephone 66200 - 704 - 0945	
Employment		Work Address			Work Telephone 00000 - 000 - 0000	
Occupation		Driver's License				



MADISON COUNTY SO
2941 U.S. Highway 51
Canton, MS 39046
Sheriff Randall Tucker
601-859-2345

INCIDENT REPORT

Incident Number SO16005142		Report Date 04/02/16		Report Time 19:17		Day of Week SATURDAY		Primary Officer ID# 515 ABELS, PERRY C.	
Received 19:17	Dispatched 19:17	Arrived 19:37	Cleared 20:00	Occurred Between the Dates/Times Of: 04/02/16 19:17 and: 04/02/16 19:17					
Address (House No, Dir, Street) 326 ROCKY HILL RD				City CANTON, MS			Address (Bldg, Unit, Apt) Bldg: Apt:		
Premise Type			Zone/Beat		Grid/Tract		Subdivision NON APPLICABLE		
Original Offense Description DISTURBANCE-DOMESTIC VIOLENCE			Actual Offense Description DISTURBANCE-DOMESTIC VIOLENCE			Weapons Involved			
UCR Description			Attempt/Completed C		Forced Entry		Call Disposition HBO (HANDLED BY OFFICER)		
Additional Offenses					UCR Descriptions				
Additional Information/Comments HUSBAND INTOX ALBERT SMITH 801305004 GRABBED HER AROUND HER NECK // R/P 802057721 / VERBAL ONLY									
Investigator Assigned					Status of the Incident				
Supervisor #1					Supervisor #2				

PERSONS INVOLVED

Person No 001	Involvement CALLER		If Victim, Relationship to Offender (if applicable)				Confidential	
Name DELOURIS SMITH			Race	Gender	HGT	WGT	Date of Birth 00/00/0000	
Age Then	Age Today 000	Hair	Eyes	Complexion		Build	Facial Hair	
Social Security 000 - 00 - 0000		Address				Telephone 66200 - 739 - 0996		
Employment			Work Address				Work Telephone 00000 - 000 - 0000	
Occupation				Driver's License				



MADISON COUNTY SO
2941 U.S. Highway 51
Canton, MS 39046
Sheriff Randall Tucker
601-859-2345

INCIDENT REPORT

Incident Number SO16019708	Report Date 12/18/16	Report Time 01:13	Day of Week SUNDAY	Primary Officer ID# 4340 REDD, DAVID B
Received 01:13	Dispatched 01:14	Arrived 01:33	Cleared 03:49	Occurred Between the Dates/Times Of: 12/18/16 01:13 and: 12/18/16 01:13
Address (House No, Dir, Street) 326 ROCKY HILL RD		City PICKENS, MS		Address (Bldg, Unit, Apt) Bldg: Apt:
Premise Type RESIDENCE/HOME	Zone/Beat NORTH	Grid/Tract	Subdivision NON APPLICABLE	
Original Offense Description DISTURBANCE-FAMILY	Actual Offense Description DISTURBANCE-FAMILY		Weapons Involved KNIFE/CUTTING INSTRUMENT	
UCR Description ALL OTHER OFFENSES	Attempt/Completed C	Forced Entry N	Call Disposition ARREST MADE	
Additional Offenses		UCR Descriptions		
Additional Information/Comments ALBERT SMITH WAS TRYING TO RAPE A 28 YR OLD FEMALE, HAD A KNIFE AT THE SON // ALBERT SMITH // 1 IN CUSTODY 1:52				
Investigator Assigned		Status of the Incident		
Supervisor #1 MOORE, SLADE		Supervisor #2 MOORE, SLADE		

PERSONS INVOLVED

Person No 001	Involvement CALLER	If Victim, Relationship to Offender (if applicable)				Confidential
Name DELOURIS JEAN SMITH		Race B	Gender F	HGT 509	WGT 180	Date of Birth
Age Then 55	Age Today 056	Hair BLACK	Eyes BROWN	Complexion DARK BROWN	Build MEDIUM	Facial Hair NOT APPLIC
Social Security		Address 326 ROCKY HILL RD PICKENS MS		Telephone 66200 - 739 - 0996		
Employment		Work Address		Work Telephone 00000 - 000 - 0000		
Occupation		Driver's License MS802057721				

Person No 002	Involvement ARREST	If Victim, Relationship to Offender (if applicable)				Confidential
Name ALBERT SMITH		Race B	Gender M	HGT 510	WGT 240	Date of Birth
Age Then 52	Age Today 053	Hair BLACK	Eyes BROWN	Complexion DARK BROWN	Build BROAD	Facial Hair NOT APPLIC
Social Security		Address 326 ROCKY HILL RD PICKENS MS		Telephone 00000 - 000 - 0000		

Employment RETIRED PECOS	Work Address	Work Telephone 00000 - 000 - 0000
Occupation	Driver's License MS801305004	

Person No 003	Involvement INVOLVED	If Victim, Relationship to Offender (if applicable)				Confidential
Name TYRONE LORENZO WILSON		Race B	Gender M	HGT 509	WGT 157	Date of Birth
Age Then 37	Age Today 038	Hair BLACK	Eyes BROWN	Complexion DARK BROWN	Build SLIM	Facial Hair GOATEE
Social Security		Address 316 ROCKY HILL RD PICKENS MS			Telephone 76900 - 234 - 0716	
Employment		Work Address			Work Telephone 00000 - 000 - 0000	
Occupation		Driver's License MS802151013				

Person No 004	Involvement INVOLVED	If Victim, Relationship to Offender (if applicable)				Confidential
Name DANNA THOMAS		Race B	Gender F	HGT 509	WGT 128	Date of Birth
Age Then 28	Age Today 029	Hair BLACK	Eyes BROWN	Complexion MEDIUM BRO	Build SMALL	Facial Hair NOT APPLIC
Social Security		Address 105 LASHONDA CR CANTON MS			Telephone 60100 - 407 - 4749	
Employment		Work Address			Work Telephone 00000 - 000 - 0000	
Occupation		Driver's License MS802218118				

NARRATIVE DATA

On December 18, 2016 (Sunday), I Deputy David Redd (MCSO 42) received a disturbance call on 326 Rocky Hill Rd. Dispatch also stated that the offender had a knife and was trying to stab the son (Tyrone Wilson). When I arrived I spoke with the son, Tyrone Wilson. He said he was in another room with his girlfriend when the house lights went out. He got up to check to see what happened. When he was walking through the den, he noticed Albert Smith standing over his cousin, Danna Thomas with his hand in her pants in what appeared to be Albert playing with Danna's vagina. Danna was passed out asleep and was unaware of Albert's touching. Tyrone said he stood there for a moment to make sure he actually saw what he thought and when he was sure, he confronted Albert. Albert became angry and went to the kitchen and grabbed a kitchen knife and tried to assault Tyrone with the knife. The mother, Delouris Smith was asleep on the other couch close to where Danna was. She woke up along with Danna to see Albert trying to attack Tyrone with the knife. Delouris got in between them to keep Albert from stabbing Tyrone. Delouris stated Albert calmed down and placed the knife down and Tyrone left the house, but Tyrone returned. When I spoke to Danna, she told me she was unaware that Albert was touching her. Delouris said she did not see Albert touching her, but she awoke to the disturbance between Albert and Tyrone. I spoke with Albert and he denied all of it, but he appeared extremely drunk and was causing problems within the house mouthing back and forth with Delouris. Deputy Bernard Newsome (MCSO 35) arrived on scene and we placed Albert in custody. I told Tyrone and Danna they could file charges on Albert. I charged Albert with Disturbing the Peace and he was given a \$500 bond.

End of Report
Deputy David Redd MCSO 42
December 18, 2016



MADISON COUNTY SO
2941 U.S. Highway 51
Canton, MS 39046
Sheriff Randall Tucker
601-859-2345

INCIDENT REPORT

Incident Number SO17005132		Report Date 04/05/17		Report Time 22:18		Day of Week WEDNESDAY		Primary Officer ID# 1914 FLAX, ELTON P	
Received 22:18	Dispatched 22:18	Arrived 22:46	Cleared 00:29	Occurred Between the Dates/Times Of: 04/05/17 22:18 and: 04/05/17 22:18					
Address (House No, Dir, Street) 326 ROCKY HILL RD				City CANTON, MS			Address (Bldg, Unit, Apt) Bldg: Apt:		
Premise Type			Zone/Beat		Grid/Tract		Subdivision ALL OTHER		
Original Offense Description DISTURBANCE			Actual Offense Description DISTURBANCE			Weapons Involved			
UCR Description			Attempt/Completed C		Forced Entry		Call Disposition REPORT FILED		
Additional Offenses					UCR Descriptions				
Additional Information/Comments ALBERT SMITH (INTOXICATED) GRABBED R/P'S ARM; THEN BROKE TRUCK WINDOW; @ 336 ROCKY HILL RD (KNIVES IN HOUSE)									
Investigator Assigned					Status of the Incident				
Supervisor #1					Supervisor #2				

PERSONS INVOLVED

Person No 001	Involvement CALLER		If Victim, Relationship to Offender (if applicable)				Confidential	
Name DELORIS SMITH			Race	Gender	HGT	WGT	Date of Birth 00/00/0000	
Age Then	Age Today 000	Hair	Eyes	Complexion		Build	Facial Hair	
Social Security 000 - 00 - 0000		Address				Telephone 66200 - 739 - 0996		
Employment			Work Address			Work Telephone 00000 - 000 - 0000		
Occupation				Driver's License				



MADISON COUNTY SO
2941 U.S. Highway 51
Canton, MS 39046
Sheriff Randall Tucker
601-859-2345

INCIDENT REPORT

Incident Number SO17017613		Report Date 11/26/17		Report Time 12:40		Day of Week SUNDAY		Primary Officer ID# 1963 EVANS, JOEL	
Received 12:40	Dispatched 12:40	Arrived 12:40	Cleared 13:07	Occurred Between the Dates/Times Of: 11/26/17 12:14 and: 11/26/17 12:14					
Address (House No, Dir, Street) LORING RD / TRUITT RD				City CANTON, MS		Address (Bldg, Unit, Apt) Bldg: Apt:			
Premise Type HIGHWAY/ROAD/ALLEY			Zone/Beat		Grid/Tract		Subdivision		
Original Offense Description AMBULANCE CALL			Actual Offense Description AMBULANCE CALL			Weapons Involved UNKNOWN			
UCR Description ALL OTHER OFFENSES		Attempt/Completed C		Forced Entry		Call Disposition AMBULANCE (TRANSPORT)			
Additional Offenses				UCR Descriptions					
Additional Information/Comments CALLER ADV HIS STEP FATHER IS HAVING A POSSIBLE HEART ATTACK PAFFORD 466									
Investigator Assigned					Status of the Incident				
Supervisor #1 SQUIRES, TOMMY					Supervisor #2 SQUIRES, TOMMY				

PERSONS INVOLVED

Person No 001	Involvement VICTIM-COMPLAINANT		If Victim, Relationship to Offender (if applicable)					Confidential
Name ALBERT SMITH			Race B	Gender M	HGT 999	WGT 999	Date of Birth	
Age Then 053	Age Today 053	Hair UNKNOWN	Eyes UNKNOWN	Complexion UNKNOWN	Build UNKNOWN	Facial Hair UNKNOWN		
Social Security		Address 326 ROCKY HILL RD PICKENS MS				Telephone 66200 - 739 - 2526		
Employment			Work Address			Work Telephone 00000 - 000 - 0000		
Occupation				Driver's License				

Person No 002	Involvement REPORTING PARTY		If Victim, Relationship to Offender (if applicable)					Confidential
Name DELOURIS SMITH			Race B	Gender F	HGT 999	WGT 999	Date of Birth	
Age Then 056	Age Today 056	Hair UNKNOWN	Eyes UNKNOWN	Complexion UNKNOWN	Build UNKNOWN	Facial Hair UNKNOWN		
Social Security		Address 326 ROCKY HILL RD PICKENS MS				Telephone 66200 - 739 - 0996		
Employment			Work Address			Work Telephone 00000 - 000 - 0000		

Occupation	Driver's License
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VEHICLES INVOLVED

Vehicle No 001	Vehicle Involvement VICTIM'S	Year 0000	Make CHEVROLET	Model TRAILBLAZER	Style SPORT UTIL			
Serial Number	Color (Top and Bottom) WHITE WHITE			Plate MS MDY277	Expires 18			
Registered Owner			Legal Owner					
Comments								
Addl Comments								

NARRATIVE DATA

On 11/27/2017 at 12:40 p.m. I was traveling East on Loring Rd approaching Truitt Rd when I observed a black female in a white Chevrolet Trailblazer waiving from Truitt Rd. It appeared the female was trying to get my attention, so I slowed and pulled onto Truitt Rd and asked the female if she was okay. The female stated her husband, who was sitting in the front passenger seat, was having a heart attack. I notified dispatch, and EMS was dispatched to my location. I identified the female as Delouris Smith, and her husband(patient) as Albert Smith. Several minutes later a Valley View FD unit arrived on scene and rendered medical aid until Pafford Ambulance arrived. Albert Smith was transported to St. Dominic Hospital via Pafford Ambulance. EOR

Judge: _____
Case No.(s): _____
Arraignment Date: _____
Bond: _____
Defendant: Smith Quincy
Address: _____
SS # _____ SL # _____
Phone # _____
Employer: _____
Phone # of Employer: _____
Supervisor: _____ Verified: _____

Charges: DWLS, No insurance

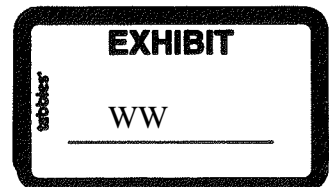
Affiant: _____ Date Subpoenaed: _____

Other Witnesses:

Bonding Companies: Cash Bond App. Date: 8/8/12 9:00a.m.
Hearing Date: Sept. 6, 12 9a.m.
Continued to _____ for _____
Continued to _____ for _____
Continued to _____ for _____

Attorney: _____

Notes: To present documentation



CASE RECORD OF STATE VERSUS SMITH QUINCY CORDET

CASE: MS000-99283 CHARGE DRIVING W/SUSPEND LIC

COURT DATE: 9/06/2012

SMITH QUINCY CORDET
109 SUNSET AVE
CANTON MS 39046-0000

AFFIANT/WITNESS: JOHNSON HUNT DEPUTY

ATTORNEY FOR DEF: HON. GREGORY WEBER

BOND: 250.00 CASH AT JAIL #20546 JAIL RCPT#
APPEAL BOND:

=====

O R D E R

DEFENDANT IS FOUND: GUILTY _____


SENTENCE:

GUILTY IN ABSENTIA. 48 HOURS, SUSPENDED
CLERK ORDERED TO CONVERT CASH BOND AS APPLICABLE

FINE \$ 200.00 COSTS \$ 132.50 TOTAL \$ 332.50

SO ORDERED, THIS THE 6 DAY OF Sept 2012
DOC. 1868 PAGE 131 BY: [Signature]
JUSTICE COURT JUDGE

CASE: MS000099283 VIOLATION DATE: 4/20/2012 DATE CLOSED:



MADISON COUNTY JUSTICE COURT

CASE RECORD OF STATE VERSUS SMITH QUINCY CORDEZ

CASE: MS000-97576 CHARGE NO PROOF LIABILITY INSURANCE

COURT DATE: 9/06/2012

SMITH QUINCY CORDEZ
204 DOBSON AVE
CANTON MS 39046-0000

AFFIANT/WITNESS: JONES ALBERT COUNTY PATROL

ATTORNEY FOR DEF:

BOND: 650.00 CASH AT JAIL #20546 JAIL RCPT#
APPEAL BOND:

ORDER

DEFENDANT IS FOUND: GUILTY

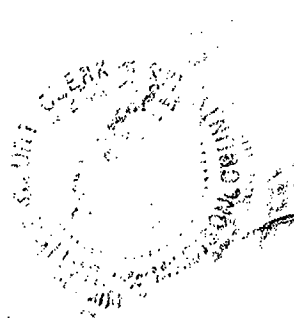
SENTENCE:
GUILTY IN ABSENTIA. CLERK ORDERED TO CONVERT CASH BOND AS APPLICABLE

FINE \$ 500.00 COSTS \$ 132.50 TOTAL \$ 632.50

SO ORDERED, THIS THE 16 DAY OF Sept 2012

DOC. 1860 PAGE 80 BY: JUSTICE COURT JUDGE

CASE: MS000097576 VIOLATION DATE: 12/31/2011 DATE CLOSED:



Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: SMITH QUINCY CORDET
109 SUNSET AVE
CANTON MS 39046

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 8/13/2012

vs:

Cause No: MSO 00-099283

SMITH QUINCY CORDET

RE: DRIVING W/SUSPEND LIC

This is to notify you that the above styled case has been set for
TO PRESENT PROOF DOC on the 6th day of September A. D. 2012
at 9:00 AM. Your attendance is required.

MAMIE CHINN presiding.

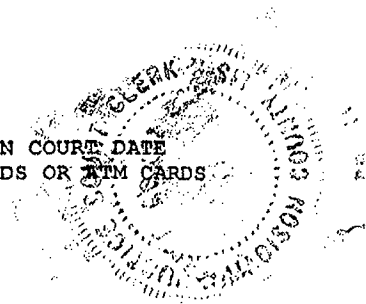
Susan McCarty, Clerk
Madison County Justice Court

By: _____

Cheryl J Horn, DC

DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS OR DEBIT CARDS OR ATM CARDS



Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: SMITH QUINCY CORDEZ
204 DOBSON AVE
CANTON MS 39046

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 8/13/2012

vs:

Cause No: MSO 00-097576

SMITH QUINCY CORDEZ

RE: NO PROOF LIABILITY INSURANCE

This is to notify you that the above styled case has been set for
TO PRESENT PROOF DOC on the 6th day of September A. D. 2012
at 9:00 AM. Your attendance is required.

MAMIE CHINN presiding.

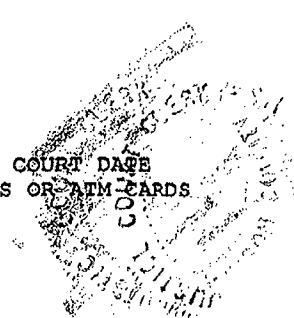
Susan McCarty, Clerk
Madison County Justice Court

By: _____

Cheryl J Horn, DC

DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS OR DEBIT CARDS OR ATM CARDS



Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: SMITH QUINCY CORDET
204 DOBSON AVE
CANTON MS 39046

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 5/18/2012

vs:

Cause No: MSO 00-099283

SMITH QUINCY CORDET DRIVING W/SUSPEND LIC

This is to notify you that the above styled case has been set for
TO PRESENT PROOF DOC on the 8th day of August A. D. 2012
at 9:00 AM Your attendance is required.

MAMIE CHINN presiding.

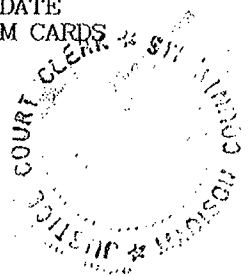
Susan McCarty, Clerk
Madison County Justice Court

By: _____

Mary Lockett, DC

DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS OR DEBIT CARDS OR ATM CARDS



4/21/12

MADISON CRIMINAL INFORMATION SYSTEM

BK0000048125-003

QUINCY C. SMITH
XXX-XX-2958

***** RECEIPT ***** NUMBER 20,546

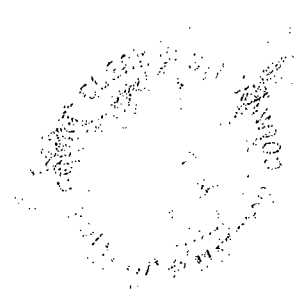
STATE OF MISSISSIPPI

MADISON COUNTY

Not enough money

COURT	**** CHARGE ****	** COURT DATE **	BOND AMOUNT *
JUSTICE	Driving with Suspended/revoked	0/00/00	250.00 CASH BON
JUSTICE	Failure of Owner or Operator o	0/00/00	650.00 CASH BON
Mo # 14466115042			
	CASH BOND	\$	900.00
	BOND FEES	\$	25.00
	TOTAL	\$	925.00

OFFICER:

Deanna S. Kelly, DPH

SMITH, Quincy C

Judge: 3

Case No(s):

Arraignment Date:

Bond:

Defendant:

Smith, Quincy C

Address:

SS #

SL #

Phone #

Employer:

Phone # of Employer:

Supervisor:

Verified:

Charges:

Driving while License suspended

Affiant:

Date Subpoenaed:

Other Witnesses:

Bonding Companies:

App. Date:

02-20-13 @ 9am

Hearing Date:

Continued to for

Continued to for

Continued to for

Attorney:

Notes:

to present proof

MADISON COUNTY		Agency Code 0045		No 103247	
IN THE COURT DESIGNATED BELOW, THE AFFIANT HEREBY, BEING DULY SWORN, UPHOLDS DOES DEPOSE AND SAY AT THE FOLLOWING LOCATION, TIME AND DATE:					
Location of Violation Highway 1		Accident Yes		District 1	
Date May 9, 2017	Time 8:57 AM	Precinct 1			
Defendant: (First Name, Middle Name, Last Name) Quincy Smith					
License Address 109 Sunset Ave					
City Canton	State MS	Zip Code 39046			
Driver's License Number 881-77-4444	Class 12	Sex M	Race B	Date of Birth 12/12/1961	
Vehicle License Number MS 12	Year 12	Make Mer	Model 4M	Type PLC	
Defendant's Current Address:					
Defendant's Current Telephone Number:					
That the above named defendant, while operating the aforementioned motor vehicle, did willfully and unlawfully commit the offense of:					
(Check Only One Offense Each Ticket)		SPEED		ZONE	
<input type="checkbox"/> S22 Speeding <input type="checkbox"/> M44 Disregard For Traffic Device <input type="checkbox"/> N70 Driving Wrong Side Road <input checked="" type="checkbox"/> B26 Driving While License Suspended <input type="checkbox"/> M34 Following Too Closely <input type="checkbox"/> M70 Improper Passing <input type="checkbox"/> N01 Failure To Yield Right Of Way <input type="checkbox"/> M84 Careless Driving <input type="checkbox"/> M81 Careless Driving <input type="checkbox"/> Explanation: <input type="checkbox"/> Check Only If Driver License Is Deposited In Lieu Of Bond Or Other Security. <input type="checkbox"/> Violation Pursuant To Commercial Driver's License Law. <input type="checkbox"/> Required Plead Under Hazardous Materials Transportation Act. <input type="checkbox"/> Against the peace and dignity of the State of Mississippi.					
Affiant / Officer's Signature: Quincy Smith Unit / Badge: 15					
Sworn to before me this the 12 day of May , 20 17					
Clerk Quincy Smith					
You are hereby notified to appear before the court (justice/judge) to answer the charge on the 12 day of May , 20 17 at 8:57 AM at Court's Physical Address: 2961 SOUTH LIBERTY ST. CANTON, MS 39046 Court's Mailing Address: 2961 SOUTH LIBERTY ST. CANTON, MS 39046 Court's Telephone Number: 601-859-6337 www.madisonctix.com NOTE: CONTACT THE COURT TO CONFIRM THE COURT DATE SEE REVERSE SIDE FOR ADDITIONAL INFORMATION					
ORIGINAL/AFFIDAVIT Case _____ Page _____ Docket _____ 7-28					

MADISON COUNTY JUSTICE COURT

CASE RECORD OF STATE VERSUS SMITH QUINCY C

CASE: MS000-103247 CHARGE DRIVING W/SUSPEND LIC

COURT DATE: 2/20/2013

SMITH QUINCY C
109 SUNSET AVE
CANTON

MS 39046-0000

AFFIANT/WITNESS: DEPUTY WILL WEISENBERGER

ATTORNEY FOR DEF: HON. GREGORY WEBER

BOND:

JAIL RCPT#

APPEAL BOND:

=====

O R D E R

DEFENDANT IS FOUND: GUILTY_____

SENTENCE:

DEFENDANT FAILED TO APPEAR TO PRESENT PROOF OF VALID LICENSE.
GUILTY IN ABSENTIA, 48 HOURS SUSPENDED.

FINE \$ 400.00 COSTS \$ 132.50 TOTAL \$ 532.50

SO ORDERED, THIS THE 20 DAY OF Feb 13.

DOC. 3948

PAGE 199

BY:

Will Weinberger
JUSTICE COURT JUDGE

CASE: MS000103247 VIOLATION DATE: 9/24/2012 DATE CLOSED:



Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: SMITH QUINCY C
109 SUNSET AVE
CANTON MS 39046

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 10/25/2012

vs:

Cause No: MSO 00-103247

SMITH QUINCY C

RE: DRIVING W/SUSPEND LIC

This is to notify you that the above styled case has been set for
TO PRESENT PROOF DOC on the 20th day of February A. D. 2013
at 9:00 AM. Your attendance is required.

BILL WEISENBERGER presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

Korea Davis, DC

DC

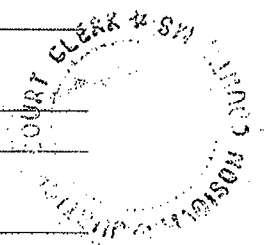
ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE.
WE DO NOT ACCEPT PERSONAL CHECKS OR DEBIT CARDS OR ATM CARDS

Judge: _____	
Case No.(s): _____	
Arraignment Date: _____	
Bond: _____	
Defendant: _____	
Address: _____	
SS # _____	SL # _____
Phone # _____	
Employer: _____	
Phone # of Employer: _____	
Supervisor: _____	Verified: _____
Charges: _____	

Affiant: _____	Date Subpoenaed: _____
_____	_____
_____	_____
Other Witnesses:	

Bonding Companies: _____	App. Date: _____
_____	Hearing Date: _____
_____	Continued to _____ for _____
_____	Continued to _____ for _____
_____	Continued to _____ for _____
Attorney: _____	

Notes: _____	



STATE OF MISSISSIPPI - UNIFORM TRAFFIC TICKET									
MADISON COUNTY		Judicial District: <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2	Agency Code: 0045		No 105485				
IN THE COURT DESIGNATED BELOW, THE AFFIANT HEREIN, BEING DULY SWORN, UPON OATH DOES DEPOSE AND SAY: AT THE FOLLOWING LOCATION, TIME AND DATE:									
Location of Violation Hwy 16				Affiant P. Adams Jr		Hwy			
Day Thurs	Date 11-25-12	Time 0:32 P	Accident <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	District	Precinct				
Defendant: (First Name, Quincy L		Middle Name, Smith	Last Name						
License Address 204 Olsen Ave									
City Canton		State MS			Zip Code 39046				
Driver's License Number B01774986		Class	State	Sex	Race	Date of Birth			
Vehicle License Number MD0619		State	Year	Make	Model	Type			
Defendant's Current Address: 213 Mercury Highway #16									
Defendant's Current Telephone Number:									
That the above named defendant, while operating the aforementioned motor vehicle, did willfully and unlawfully commit the offense of:									
(Check Only One Offense Each Ticket)									
<input type="checkbox"/> S92 Speeding		<input type="checkbox"/> F02 Child Restraint Violation		<input type="checkbox"/> ZONE					
<input type="checkbox"/> M14 Disregard For Traffic Device		<input type="checkbox"/> F04 Seatbelt Violation							
<input type="checkbox"/> N70 Driving Wrong Side Road		<input type="checkbox"/> B51 No Drivers License (Expired)							
<input type="checkbox"/> B26 Driving While License Suspended		<input type="checkbox"/> B55 No Motor Vehicle Inspection (Expired)							
<input type="checkbox"/> M34 Following Too Closely		<input type="checkbox"/> B53 Expired Tag/No Tag							
<input type="checkbox"/> M70 Improper Passing		<input type="checkbox"/> B26 Driving While License Suspended (Under Implied Consent Law)							
<input type="checkbox"/> N01 Failure To Yield Right Of Way		<input type="checkbox"/> N50 Improper Turn							
<input type="checkbox"/> M84 Reckless Driving		<input type="checkbox"/> D36 No Proof of Liability Ins.							
<input type="checkbox"/> M81 Careless Driving		<input type="checkbox"/> Other Violation ()							
<input type="checkbox"/> Explanation:									
<input type="checkbox"/> Check Only If Driver License Is Deposited In Lieu Of Bond Or Other Security.									
<input type="checkbox"/> Violation Pursuant To Commercial Driver's License Law.									
<input type="checkbox"/> Required Placard Under Hazardous Materials Transportation Act.									
Against the peace and dignity of the State of Mississippi.									
Affiant / Officer's Signature [Signature]				Unit / Badge 282					
Sworn to before me this the 27 day of December , 20 12									
Clerk [Signature]									
You are hereby notified to appear before the court (Justice/Municipal) to answer the charge on the 27 day of December , 20 12 , at 10:00 AM at:									
Court's Physical Address: 2961 SOUTH LIBERTY ST. CANTON, MS 39046									
Court's Mailing Address: 2961 SOUTH LIBERTY ST. CANTON, MS 39046									
Court's Telephone Number: 601-859-6337 www.madisoncotif.com									
NOTE: CONTACT THE COURT TO CONFIRM THE COURT DATE									
SEE REVERSE SIDE FOR ADDITIONAL INFORMATION									
ORIGINAL/AFFIDAVIT Case _____ Page _____ Docket _____ 7-09									

PC - Lempke & (Paw)
Lawrence-Greenwood 00600
DWLS



Judge: _____

Case No.(s): _____

Arraignment Date: _____

Bond: _____

Defendant: _____

Address: _____

SS # _____ SL # _____

Phone # _____

Employer: _____

Phone # of Employer: _____

Supervisor: _____ Verified: _____

Charges: _____

Affiant: _____ Date Subpoenaed: _____

Other Witnesses:

Bonding Companies: _____ App. Date: _____

Hearing Date: _____

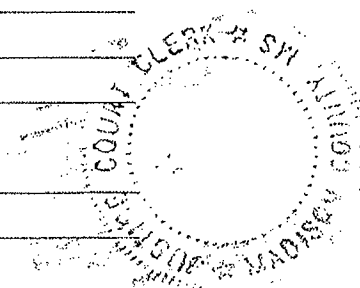
Continued to _____ for _____

Continued to _____ for _____

Continued to _____ for _____

Attorney: _____

Notes: _____



STATE OF MISSISSIPPI - UNIFORM TRAFFIC TICKET											
MADISON COUNTY		Judicial District: <input type="checkbox"/> 1 <input type="checkbox"/> 2	Agency Code: 0045		No. 105958						
IN THE COURT DESIGNATED BELOW, THE AFFIANT HEREIN, BEING DULY SWORN, UPON OATH DOES DEPOSE AND SAY: AT THE FOLLOWING LOCATION, TIME AND DATE:											
Location of Violation		Affiant		Hwy							
Day		Date	Time	AM	PM	Accident	District	Precinct			
Defendant: (First Name, Last Name)											
License Address											
City		State	Zip Code								
Driver's License Number		Class	Sex	Age	Date of Birth						
Vehicle License Number		State	Year	Make	Model	Type					
Defendant's Current Address:											
Defendant's Current Telephone Number:											
That the above named defendant, while operating the aforementioned motor vehicle, did willfully and unlawfully commit the offense of:											
(Check Only One Offense Each Ticket)		SPEED		ZONE							
<input type="checkbox"/> S92 Speeding <input type="checkbox"/> M14 Disregard For Traffic Device <input type="checkbox"/> N70 Driving Wrong Side Road <input type="checkbox"/> B26 Driving While License Suspended <input type="checkbox"/> M34 Following Too Closely <input type="checkbox"/> M70 Improper Passing <input type="checkbox"/> N01 Failure To Yield Right Of Way <input type="checkbox"/> M84 Reckless Driving <input type="checkbox"/> M81 Careless Driving <input type="checkbox"/> Explanation:		<input type="checkbox"/> F02 Child Restraint Violation <input type="checkbox"/> F04 Seatbelt Violation <input type="checkbox"/> B51 No Drivers License (Expired) <input type="checkbox"/> B55 No Motor Vehicle Inspection (Expired) <input type="checkbox"/> B53 Expired Tag/No Tag <input type="checkbox"/> B26 Driving While License Suspended <input type="checkbox"/> N50 Improper Turn <input type="checkbox"/> D36 No Proof of Liability Ins. <input type="checkbox"/> Other Violation:									
<input type="checkbox"/> Check Only If Driver License Is Deposited In Lieu Of Bond Or Other Security. <input type="checkbox"/> Violation Pursuant To Commercial Driver's License Law. <input type="checkbox"/> Required Placard Under Hazardous Materials Transportation Act.											
Against the peace and dignity of the State of Mississippi.											
Affiant / Officer's Signature		Unit / Badge #									
Sworn to before me this		day of	Month	Year							
Clerk											
You are hereby notified to appear before the court (Justice/Municipal) to answer the charge on the day of April 13, 2013. At 10:00 AM at											
Court's Physical Address:		2961 SOUTH LIBERTY ST. CANTON, MS 39046									
Court's Mailing Address:		2961 SOUTH LIBERTY ST. CANTON, MS 39046									
Court's Telephone Number:		601-859-6337 www.madisoncotif.com									
NOTE: CONTACT THE COURT TO CONFIRM THE COURT DATE											
SEE REVERSE SIDE FOR ADDITIONAL INFORMATION											
ORIGINAL/AFFIDAVIT Case		Page	Docket	7-09							

STATE OF MISSISSIPPI - UNIFORM TRAFFIC TICKET											
MADISON COUNTY		Judicial District: <input type="checkbox"/> 1 <input type="checkbox"/> 2	Agency Code: 0045		No. 105959						
IN THE COURT DESIGNATED BELOW, THE AFFIANT HEREIN, BEING DULY SWORN, UPON OATH DOES DEPOSE AND SAY: AT THE FOLLOWING LOCATION, TIME AND DATE:											
Location of Violation		Affiant		Hwy							
Day		Date	Time	AM	PM	Accident	District	Precinct			
Defendant: (First Name, Last Name)											
License Address											
City		State	Zip Code								
Driver's License Number		Class	Sex	Age	Date of Birth						
Vehicle License Number		State	Year	Make	Model	Type					
Defendant's Current Address:											
Defendant's Current Telephone Number:											
That the above named defendant, while operating the aforementioned motor vehicle, did willfully and unlawfully commit the offense of:											
(Check Only One Offense Each Ticket)		SPEED		ZONE							
<input type="checkbox"/> S92 Speeding <input type="checkbox"/> M14 Disregard For Traffic Device <input type="checkbox"/> N70 Driving Wrong Side Road <input type="checkbox"/> B26 Driving While License Suspended <input type="checkbox"/> M34 Following Too Closely <input type="checkbox"/> M70 Improper Passing <input type="checkbox"/> N01 Failure To Yield Right Of Way <input type="checkbox"/> M84 Reckless Driving <input type="checkbox"/> M81 Careless Driving <input type="checkbox"/> Explanation:		<input type="checkbox"/> F02 Child Restraint Violation <input type="checkbox"/> F04 Seatbelt Violation <input type="checkbox"/> B51 No Drivers License (Expired) <input type="checkbox"/> B55 No Motor Vehicle Inspection (Expired) <input type="checkbox"/> B53 Expired Tag/No Tag <input type="checkbox"/> B26 Driving While License Suspended <input type="checkbox"/> N50 Improper Turn <input type="checkbox"/> D36 No Proof of Liability Ins. <input type="checkbox"/> Other Violation:									
<input type="checkbox"/> Check Only If Driver License Is Deposited In Lieu Of Bond Or Other Security. <input type="checkbox"/> Violation Pursuant To Commercial Driver's License Law. <input type="checkbox"/> Required Placard Under Hazardous Materials Transportation Act.											
Against the peace and dignity of the State of Mississippi.											
Affiant / Officer's Signature		Unit / Badge #									
Sworn to before me this		day of	Month	Year							
Clerk											
You are hereby notified to appear before the court (Justice/Municipal) to answer the charge on the day of April 13, 2013. At 10:00 AM at											
Court's Physical Address:		2961 SOUTH LIBERTY ST. CANTON, MS 39046									
Court's Mailing Address:		2961 SOUTH LIBERTY ST. CANTON, MS 39046									
Court's Telephone Number:		601-859-6337 www.madisoncotif.com									
NOTE: CONTACT THE COURT TO CONFIRM THE COURT DATE											
SEE REVERSE SIDE FOR ADDITIONAL INFORMATION											
ORIGINAL/AFFIDAVIT Case		Page	Docket	7-09							

cc ✓ Thompson Terrance T.

Judge: 4

Case No.(s): _____

Arraignment Date: _____

Bond: _____

Defendant: Thompson Terrance T.

Address: _____

SS # _____ SL # _____

Phone # _____

Employer: _____

Phone # of Employer: _____

Supervisor: _____ Verified: _____

Charges: Poss of Controlled Substance, w/in Poss of a Firearm, Poss of Paraphernalia

Affiant: Deputy Will Weisenberger Date Subpoenaed: _____

Other Witnesses: _____

Bonding Companies: _____ App. Date: 7/23/14 @ 9:00 A.M.

3500⁰⁰ cash Hearing Date: 9/25/14 9:00 A.M.

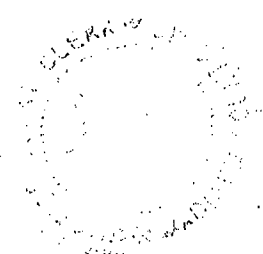
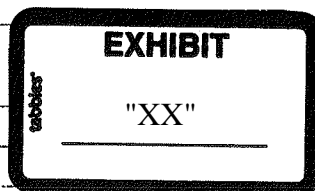
Continued to _____ for _____

Continued to _____ for _____

Continued to _____ for _____

Attorney: _____

Notes: Herbert Green



CASE NO MIS 00 024620

JUDGE BRUCE MCKINLEY

CHARGE POSS OF CONTR SUBSTANCE W/IN POSS OF FIREARM

GENERAL AFFIDAVIT

THE STATE OF MISSISSIPPI
COUNTY OF MADISON

PERSONALLY APPEARED BEFORE ME Mary Luckett, DC

A JUSTICE COURT CLERK OF MADISON COUNTY,

WEISENBERGER WILL DEPUTY
2941 HWY 51 SOUTH
CANTON MS 39046-0000

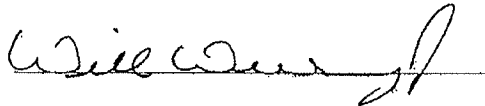
MAKES AFFIDAVIT THAT

THOMPSON TERRANCE T
380 BOYD STREET
CANTON MS 39046-0000

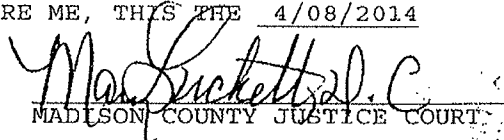
ON OR ABOUT 4/07/2014 IN MADISON COUNTY, MISSISSIPPI

DID WILLFULLY, UNLAWFULLY AND KNOWINGLY POSS A
CONTROLLED SUBSTANCE TO WIT: MARIJUANA WHILE IN
POSSESSION OF A FIRE ARM. THIS OCCURRED AT IN
THE PARKING LOT OF MADISON COUNTY JUSTICE.

AGAINST THE PEACE AND DIGNITY OF THE STATE OF MISSISSIPPI.

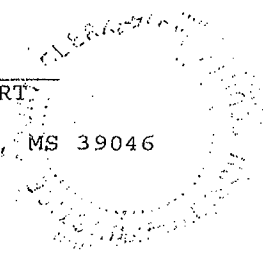


SWORN TO AND SUBSCRIBED BEFORE ME, THIS THE 4/08/2014



MADISON COUNTY JUSTICE COURT

2961 SOUTH LIBERTY, CANTON, MS 39046



CASE NO MIS 00 024621

JUDGE BRUCE MCKINLEY

CHARGE POSS OF PARAPHERNALIA

GENERAL AFFIDAVIT

THE STATE OF MISSISSIPPI

COUNTY OF MADISON

PERSONALLY APPEARED BEFORE ME Mary Lockett, DC

A JUSTICE COURT CLERK OF MADISON COUNTY,

WEISENBERGER WILL DEPUTY
2941 HWY 51 SOUTH
CANTON MS 39046-0000

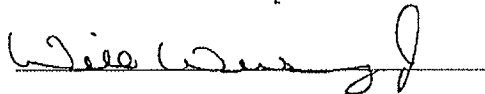
MAKES AFFIDAVIT THAT

THOMPSON TERRANCE T
380 BOYD STREET
CANTON MS 39046-0000

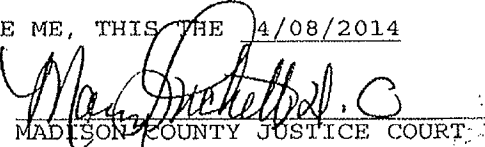
ON OR ABOUT 4/07/2014 IN MADISON COUNTY, MISSISSIPPI

DID WILLFULLY AND UNLAWFULLY POSSESS PARAPHERNALIA
WITH INTENT TO USE OR OTHERWISE INTRODUCE INTO THE
HUMAN BODY A CONTROLLED SUBSTANCE IN VIOLATION OF
THE UNIFORM CONTROLLED SUBSTANCE LAW. THIS OCCUR-
ED IN THE PARKING LOT OF THE MADISON COUNTY
JUSTICE COURT IN MADISON COUNTY, MS.

AGAINST THE PEACE AND DIGNITY OF THE STATE OF MISSISSIPPI.



SWORN TO AND SUBSCRIBED BEFORE ME, THIS THE 4/08/2014


MADISON COUNTY JUSTICE COURT

2961 SOUTH LIBERTY, CANTON, MS 39046

MADISON COUNTY JUSTICE COURT

CASE RECORD OF STATE VERSUS THOMPSON TERRANCE T

CASE: MIS00-24620 CHARGE POSS OF CONTR SUBSTANCE W/IN POSS OF FIREARM

COURT DATE: 9/25/2014

THOMPSON TERRANCE T

AFFIANT/WITNESS:

ATTORNEY FOR DEF: Defendant waived rights to attorney

BOND: 3,000.00 CASH AT JAIL #23662 JAIL RCPT#

APPEAL BOND:

O R D E R

DEFENDANT IS FOUND: GUILTY PLEA

SENTENCE:

REFUND CASH BOND OF 2316.25

FINE \$ 500.00 COSTS \$ 183.75 TOTAL \$ 683.75

SO ORDERED, THIS THE 25th DAY OF September, 2014.

DOC. 4592 PAGE 147

BY: Brian Walker
JUSTICE COURT JUDGE

CASE: MIS00024620 VIOLATION DATE:

DATE CLOSED:



MADISON COUNTY JUSTICE COURT

CASE RECORD OF STATE VERSUS THOMPSON TERRANCE T

CASE: MIS00-24621 CHARGE POSS OF PARAPHERNALIA

COURT DATE: 9/25/2014

THOMPSON TERRANCE T

AFFIANT/WITNESS:

ATTORNEY FOR DEF:

BOND: 500.00 CASH AT JAIL #23662 JAIL RCPT#

APPEAL BOND:

=====

O R D E R

DEFENDANT IS FOUND: NOLLE PROSEQUI

SENTENCE:

MOTION BY STATE TO NOLLE PROSEQUI/REFUND CASH BOND OF 500.00

SO ORDERED, THIS THE 25th DAY OF September, 2014.

DOC. 4592

PAGE 148

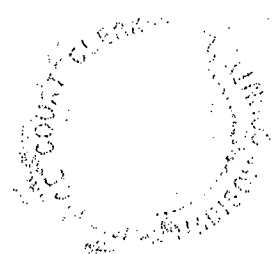
BY:

Brian H. Hays
JUSTICE COURT JUDGE

CASE: MIS00024621

VIOLATION DATE:

DATE CLOSED:



IN THE JUSTICE COURT OF MADISON COUNTY MISSISSIPPI
STATE OF MISSISSIPPI
VERSUS
THOMPSON TERRANCE T CAUSE NO. MIS00024620

WAIVER OF RIGHTS AND ENTRY OF GUILTY PLEA

I, the undersigned defendant, desire to plead guilty to the charge(s) of POSS OF CONTR SUBSTANCE W/IN POSS OF FIREARM

I understand that by pleading guilty to these charges I will be found guilty and sentenced by the Court. The sentence may include a fine, restitution, court costs and/or imprisonment in jail.

I further understand that by entering this plea I am giving up certain rights.

I am giving up the right to a trial, to confront and cross-examine witnesses against me and to call and/or subpoena witnesses against me.

I am giving up the right to have a lawyer; I understand that if I cannot afford a lawyer, one may be appointed to represent me.

I am giving up the right to have the State prove the charges against me beyond a reasonable doubt.

I am giving up the right to a jury trial.

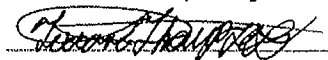
I further understand that if I am convicted of another crime, my guilty plea in this case could cause me to get a more severe penalty for that later crime.

I am giving up my right to object to the form and/or content of any testimony and evidence the State may introduce against me at a trial.

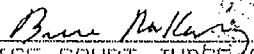
I understand that, if there was a trial, I would be allowed to testify, but I would not have to. If I didn't testify it could not be used against me.

I hereby certify under oath that there have been no threats or promises made to me in order to get me to enter this plea.

I further certify under oath that I have read and understand all the of the above and that I desire to waive my rights and enter a plea of guilty.



SWORN to and subscribed before me this, the 25th day of September 2014


JUSTICE COURT JUDGE/CLERK

The Court finds that the defendant knowingly and intelligently and not under duress, waived his rights and entered a plea of guilty.

BRUCE MCKINLEY
JUSTICE COURT JUDGE

Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: THOMPSON TERRANCE T
380 BOYD STREET
CANTON MS 39046

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 7/25/2014

vs:

Cause No: MIS 00-024620

THOMPSON TERRANCE T

RE: POSS OF CONTR SUBSTANCE W/IN POSS OF FIREARM

This is to notify you that the above styled case has been set for
SET FOR HEARING on the 25th day of September A. D. 2014
at 9:00 AM. Your attendance is required.
BRUCE MCKINLEY presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

Earnestine Brown, DC

DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS OR DEBIT CARDS OR ATM CARDS



Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: THOMPSON TERRANCE T
380 BOYD STREET
CANTON MS 39046

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 7/25/2014

vs:

Cause No: MIS 00-024621

THOMPSON TERRANCE T

RE: POSS OF PARAPHERNALIA

This is to notify you that the above styled case has been set for
SET FOR HEARING on the 25th day of September A. D. 2014
at 9:00 AM. Your attendance is required.
BRUCE MCKINLEY presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

Earnestine Brown, DC

DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS OR DEBIT CARDS OR ATM CARDS



Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: WEISENBERGER WILL DEPUTY
2941 HWY 51 SOUTH
CANTON MS 39046

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 7/25/2014

vs:

Cause No: MIS 00-024621

THOMPSON TERRANCE T

RE: POSS OF PARAPHERNALIA

This is to notify you that the above styled case has been set for
SET FOR HEARING on the 25th day of September A. D. 2014
at 9:00 AM. Your attendance is required.
BRUCE MCKINLEY presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

Earnestine Brown, DC

DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS OR DEBIT CARDS OR ATM CARDS

Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: THOMPSON TERRANCE T
380 BOYD STREET
CANTON MS 39046

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 6/16/2014

vs:

Cause No: MIS 00-024620

THOMPSON TERRANCE T

RE: POSS OF CONTR SUBSTANCE W/IN POSS OF FIREARM

This is to notify you that the above styled case has been set for
INITIAL APPEARANCE on the 23rd day of July A. D. 2014
at 9:00 AM. Your attendance is required.

BRUCE MCKINLEY presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

Shelia Taylor, DC

DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS OR DEBIT CARDS OR ATM CARDS

Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: THOMPSON TERRANCE T
380 BOYD STREET
CANTON MS 39046

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI Date: 6/16/2014
vs: Cause No: MIS 00-024621

THOMPSON TERRANCE T
RE: POSS OF PARAPHERNALIA

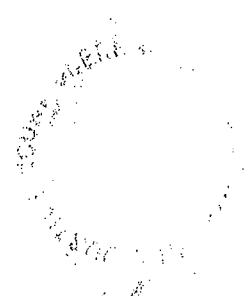
This is to notify you that the above styled case has been set for
INITIAL APPEARANCE on the 23rd day of July A. D. 2014
at 9:00 AM. Your attendance is required.
BRUCE MCKINLEY presiding.

Susan McCarty, Clerk
Madison County Justice Court

By: _____

Shelia Taylor, DC DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS OR DEBIT CARDS OR ATM CARDS



Bond # _____ MADISON COUNTY, MISSISSIPPI
 Charge(s): ① Poss of Mary
While in poss of firearm - 300th
② Poss of Para. - 500th Cash
 JUSTICE COURT
 HEARING DATE: Will Set

ARRAIGNMENT

BEFORE JUDGE Weisenberger DATE: 4/8/14
 ARRESTING OFFICER: Will Weisenberger Jr. CASE NO(S): _____

NAME OF DEFENDANT: Terrance T. Thompson
 ADDRESS: 380 Boyd St. Mom 1518 Edgewood Place Clinton
 TWO PHONE NUMBERS WHERE YOU CAN BE REACHED: 601-559-1659 - mom
601-367-2597 - cell
 SOCIAL SECURITY # _____ D.L.# _____
 DATE OF BIRTH _____

1. Copy of affidavit(s) been given to Defendant? Yes
 2. Have you been read your Miranda Warning? yes
 3. Have you been given the opportunity to make a phone call? yes
 4. Have you ever failed to appear in Court? yes
 5. Have you ever been convicted in any Court before? yes
 If yes, where? M County

6. What is your employment status (please give name, address and phone of your employer, if applicable) No

7. Are you married, and if yes, give name, address and employer of spouse? No

8. Children: No

9. Do you have a bank account, and if yes, where? No

10. Do you own or rent your home? No
 Who do you make monthly payments to? No

11. Give the name of your next of kin not living with you and their address and phone number
Jaquelyn Thompson - 302 Bella Cove Dr Canton

12. If you own a vehicle, give the description and who you make monthly payments to, if applicable:
No

13. Has an Affidavit of Indigency been completed? Will Set
 4. Has Defendant been given notice of hearing? Will Set

CLERK

JUSTICE COURT JUDGE



IN THE JUDGE COURT OF MADISON COUNTY MISSISSIPPI
STATE OF MISSISSIPPI
VERSUS
THOMPSON TERRANCE T

CAUSE NO. MIS00024620

WAIVER OF RIGHTS AND ENTRY OF GUILTY PLEA

I, the undersigned defendant, desire to plead guilty to the charge(s) of POSS OF CONTR SUBSTANCE W/IN POSS OF FIREARM

I understand that by pleading guilty to these charges I will be found guilty and sentenced by the Court. The sentence may include a fine, restitution, court costs and/or imprisonment in jail.

I further understand that by entering this plea I am giving up certain rights.

I am giving up the right to a trial, to confront and cross-examine witnesses against me and to call and/or subpoena witnesses against me.

I am giving up the right to have a lawyer; I understand that if I cannot afford a lawyer, one may be appointed to represent me.

I am giving up the right to have the State prove the charges against me beyond a reasonable doubt.

I am giving up the right to a jury trial.

I further understand that if I am convicted of another crime, my guilty plea in this case could cause me to get a more severe penalty for that later crime.

I am giving up my right to object to the form and/or content of any testimony and evidence the State may introduce against me at a trial.

I understand that, if there was a trial, I would be allowed to testify, but I would not have to. If I didn't testify it could not be used against me.

I hereby certify under oath that there have been no threats or promises made to me in order to get me to enter this plea.

I further certify under oath that I have read and understand all the of the above and that I desire to waive my rights and enter a plea of guilty.

SWORN to and subscribed before me this, the 25th day of April, 2014.

Bruce McKinley
JUSTICE COURT JUDGE/CLERK

The Court finds that the defendant knowingly and intelligently and not under duress, waived his rights and entered a plea of guilty.

Bruce McKinley
JUSTICE COURT JUDGE

Bond #

MADISON COUNTY, MISSISSIPPI

Charge(s) ① Poss of Marij

JUSTICE COURT

② While in poss of firearm - 3280

HEARING DATE:

Will Set③ Poss of Para. - 500th Cash

ARRAIGNMENT

BEFORE JUDGE WeisenbergerDATE: 4/8/14ARRESTING OFFICER: Will Weisenberger Jr.

CASE NO(S):

NAME OF DEFENDANT:

Terrance T. ThompsonGUEST TO HJC Batica

ADDRESS:

380 Boyd St. Mom1518 Edgewood Place ClintonTWO PHONE NUMBERS WHERE YOU CAN BE REACHED: 601-559-8659 - Mom601-387-2597 - cell

SOCIAL SECURITY #

D.L.#

DATE OF BIRTH

1. Copy of affidavit(s) been given to Defendant?

Yes

2. Have you been read your Miranda Warning?

Yes

Have you been given the opportunity to make a phone call?

Yes

4. Have you ever failed to appear in Court?

Yes

5. Have you ever been convicted in any Court before?

Yes

If yes, where?

M County

6. What is your employment status (please give name, address and phone of your employer, if applicable)

NO

7. Are you married, and if yes, give name, address and employer of spouse?

NO

8. Children:

NO

9. Do you have a bank account, and if yes, where?

NO

10. Do you own or rent your home?

Who do you make monthly payments to? NO

11. Give the name of your next of kin not living with you and their address and phone number

Jacqueline Thompson - 302 Bella Code Dr. Clinton

12. If you own a vehicle, give the description and who you make monthly payments to, if applicable:

NO

Has an Affidavit of Indigency been completed?

Has Defendant been given notice of hearing?

Will Set

CLERK

JUSTICE COURT JUDGE

PIP

Thompson Terrance Arnone

Judge: _____

Case No.(s): _____

Arraignment Date: _____

Bond: _____

Defendant: Thompson Terrance T.

Address: _____

SS # _____ SL # _____

Phone # _____

Employer: _____

Phone # of Employer: _____

Supervisor: _____ Verified: _____

Charges: Carrying a Conceal Weapon

Affiant: Sgt. Sam Howard SO-32 Date Subpoenaed: _____

Other Witnesses:

Bonding Companies: _____ App. Date: 3/8/17 @ 9am

Hearing Date: _____

Continued to _____ for _____

Continued to _____ for _____

Continued to _____ for _____

Attorney: _____

Notes: _____

[Faint, illegible handwritten notes and stamps in the bottom right corner.]

170508

THE STATE OF MISSISSIPPI

COUNTY OF MADISON

PERSONALLY APPEARED BEFORE ME

Darion Smith

A Justice Court Judge/Clerk of said County,

SGT. SAM HOWARD (SO-32)

2941 Hwy 51 South

Canton, MS 39046

Makes affidavit that:

TERRANCE TYRONE THOMPSON

Date of Birth

S.S.#

Address

380 BOYD STREET

City

CANTON

State MS

Zip 39046

on or about JANUARY 23, 2017 in the county aforesaid

DID WILLFULLY, UNLAWFULLY, AND KNOWINGLY CARRY CONCEALED IN WHOLE OR PART A TAURUS, 9MM, MODEL PT111 G2, SERIAL #TIR24018 A DEADLY WEAPON AT CANTON ESTATES APT.'S LOCATED AT 388 RICKS DRIVE, CANTON IN MADISON COUNTY MISSISSIPPI.

DEADLY WEAPON; CARRYING WHILE CONCEALED {97-37-1}

AGAINST THE PEACE AND DIGNITY OF THE STATE OF MISSISSIPPI.

Darion Smith SO-32
DS

Sworn to and subscribed before me, this

23

day of

Jan, 2017.

[Signature]

Justice Court Judge/ Clerk

Madison County Justice Court

175 N. Union Street

Canton, Ms. 39046

STATE OF MISSISSIPPI
 VERSUS
 THOMPSON TERRANCE TYRONE

CAUSE NO. HUS00002302

WAIVER OF RIGHTS AND ENTRY OF GUILTY PLEA

I, the undersigned defendant, desire to plead guilty to the charge(s) of UNLAWFUL POSSESSION OF A FIREARM.

I understand that by pleading guilty to these charges I will be found guilty and sentenced by the Court. The sentence may include a fine, restitution, court costs and/or imprisonment in jail.

I further understand that by entering this plea I am giving up certain rights.

I am giving up the right to a trial, to confront and cross-examine witnesses against me and to call and/or subpoena witnesses against me.

I am giving up the right to have a lawyer. I understand that if I cannot afford a lawyer, one may be appointed to represent me.

I am giving up the right to have the State prove the charges against me beyond a reasonable doubt.

I am giving up the right to a jury trial.

I further understand that if I am convicted of another crime, my guilty plea in this case could cause me to get a more severe penalty for that later crime.

I am giving up my right to object to the form and/or content of any testimony and evidence the State may introduce against me at a trial.

I understand that, if there was a trial, I would be allowed to testify, but I would not have to. If I didn't testify it could not be used against me.

I hereby certify under oath that there have been no threats or promises made to me in order to get me to enter this plea.

I further certify under oath that I have read and understand all the of the above and that I desire to waive my rights and enter a plea of guilty.

SWORN to and subscribed before me this, the 8 day of March, 2018.

Martin B. Huff
 JUSTICE COURT JUDGE/Clerk

The Court finds that the defendant knowingly and intelligently and not under duress, waives his rights and entered a plea of guilty.

MARTIN B. HUFF
 JUSTICE COURT JUDGE

MADISON COUNTY JUSTICE COURT

CASE RECORD OF STATE VERSUS THOMPSON TERRANCE TYRONE

CASE: MIS00-28508 CHARGE CARRYING A CONCEALED WEAPON

COURT DATE: 3/08/2017

THOMPSON TERRANCE TYRONE

AFFIANT/WITNESS:

ATTORNEY FOR DEF: Defendant waived rights to attorney

BOND: 500.00 INTERNATIONAL JAIL RCPT#

APPEAL BOND:

=====

O R D E R

DEFENDANT IS FOUND: GUILTY PLEA

SENTENCE:

GUILTY PLEA. 10 DAYS IN THE MADISON COUNTY JAIL SUSPENDED UNDER THE
CONDITION OF NO FURTHER CHARGES AND ALL FINES ARE PAID IN FULL.
TO PAY \$50 ON 03082017 AND BALANCE TO BE PAID IN FULL WITHIN 90 DAYS.

FINE \$ 200.00 COSTS \$ 183.75 TOTAL \$ 383.75

SO ORDERED, THIS THE 8 DAY OF March, 2017.

DOC. 2068

PAGE 152

BY:

Mark B. Hill
JUSTICE COURT JUDGE

CASE: MIS00028508 VIOLATION DATE: 1/23/2017 DATE CLOSED:

Justice Court of Madison County
2961 S. Liberty Street
Canton, MS 39046
859-6337

To: THOMPSON TERRANCE TYRONE
380 BOYD STREET
CANTON MS 39046

IMPORTANT NOTICE

THE STATE OF MISSISSIPPI

Date: 2/06/2017

vs:

Cause No: MIS 00-028508

THOMPSON TERRANCE TYRONE

RE: CARRYING A CONCEALED WEAPON

This is to notify you that the above styled case has been set for
INITIAL APPEARANCE on the 8th day of March A. D. 2017
at 9:00 AM. Your attendance is required.

MARTINA GRIFFIN presiding.

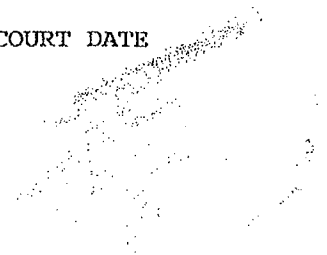
Susan McCarty, Clerk
Madison County Justice Court

By: _____

STEPHANIE BURTON, DC

DC

ALL COURT ORDERED FINES AND COST ARE DUE ON COURT DATE
WE DO NOT ACCEPT PERSONAL CHECKS



**INTERNATIONAL FIDELITY INSURANCE COMPANY
AND
AMERICAN NATIONAL BAIL BONDING AGENCY, LLC.**



P.O. Box 720388
Byram, MS 39272

BAIL AGENT: George Sandifer
LICENSE NO: 8910392

Sally Slaughter
WIC # 10286088
601-880-0447

CASE NO: _____
POWER NO: 18K-417779
PIN NO: _____
RACE: BLACK
SEX: MALE
SSN: _____
DOB: _____

INTERNATIONAL FIDELITY INSURANCE COMPANY
AMERICAN NATIONAL BAIL BONDING AGENCY, LLC

State of Mississippi
County of Madison

We, Terrence Thompson Principal, and International Fidelity Insurance Company and American National Bail Bonding Agency, LLC., agree and bind ourselves to pay unto the State of Mississippi Five hundred Dollars (\$ 500) unless the said Terrence Thompson shall appear before the Justice Court of Madison County at the next term thereof held at the courthouse in the _____ Judicial District of said County in the City of Canton on the _____ day of next 20____ time to answer to a charge of discharging / displaying a firearm and then and there remain from day to day and term to term, until discharged by law, said charge being by AFFIDAVIT.

Witness our Signatures, this the 24 Day of January A.D. 2017
Principal: Terrence Thompson Address: 380 Boyd St
Surety: International Fidelity Insurance Co. Inc. 26560 Agoura Rd., Suite 100, Calabasas, CA 91302

George Sandifer / Sally Slaughter
Agents for International Fidelity Insurance Co.
American National Bail Bonding Agency, LLC

Approved: this _____ day of _____

Sheriff _____ County, Miss.
By _____ Deputy

Attorney _____
Address _____

If Defendant fails to appear on proper Court Date. The SURETY must be notified via Certified mail at the following address.
International Fidelity Insurance Co., Inc., 26560 Agoura Rd., Suite 100, Calabasas, CA 91302
Tel: 1-800-935-2245

and a courtesy copy is requested to be mailed or faxed to American National Bail Bonding Agency, LLC
P.O. Box 720388, Byram, Mississippi 39272 • Fax: 601-373-0069 • Tel: 601-371-6700

VERIFY FIRST - THIS DOCUMENT IS PRINTED IN BLUE, RED & BLACK INKS.

Only the original Power of Attorney will bind this Surety.

POWER OF ATTORNEY
INTERNATIONAL FIDELITY INSURANCE COMPANY
 P.O. BOX 9810 CALVERAS CA 91372-9810 (800) 833-2245

POWER NUMBER 151K-417779

POWER AMOUNT \$ 1,100

THIS POWER VOID IF NOT USED BY: DECEMBER 31, 2017

KNOW ALL MEN BY THESE PRESENTS, that INTERNATIONAL FIDELITY INSURANCE COMPANY, a corporation duly organized and existing under the laws of the State of New Jersey, has constituted and appointed, and does hereby constitute and appoint, its true and lawful Attorney-in-Fact, with full power and authority to sign the company's name and affix its corporate seal, to send, deliver, on its behalf as surety, any and all obligations as herein provided, and the execution of such obligations in pursuance of these presents shall be as binding upon the company, as fully and to all intents and purposes as if done by the regularly elected officers of said company at its home office in their own proper person, and the said company hereby ratifies and confirms all and whatsoever its said Attorney-in-Fact may lawfully do and perform in the premises by virtue of these presents.

THIS POWER OF ATTORNEY IS VOID IF ALTERED OR ERASED. THE OBLIGATION OF THE COMPANY SHALL NOT EXCEED THE SUM OF

ONE THOUSAND ONE HUNDRED DOLLARS *****

AND MAY BE EXECUTED FOR RECOGNIZANCE ON CRIMINAL BAIL BONDS ONLY.

Authority of such Attorney-in-Fact is limited to the execution of appearance bonds and cannot be construed to guarantee defendant's future lawful conduct, adherence to travel limitation, fines, restitution, payments or penalties, or any other condition imposed by a court not specifically related to court appearances. A separate Power of Attorney must be attached to each bond executed. Powers of Attorney must not be returned to Attorney-in-Fact, but should remain a permanent part of the court records.

NOTICE: Stacking of Powers is strictly prohibited. No more than one power from this Surety may be used to post any one bail amount.

IN WITNESS WHEREOF, said INTERNATIONAL FIDELITY INSURANCE COMPANY, by virtue of authority conferred by its Board of Directors, has caused these presents to be sealed with its corporate seal, signed by its Chairman of the Board and attested by its Secretary, this 23rd day of March, 1998.

Francis A. Korman, Chairman of the Board
 Norman Korman, Secretary

NOT VALID FOR IMMIGRATION

Form # IF-10100 (9/06)

ORIGINAL

02364364

Defendant Teane Thompson DOB 12/23/93

Case # Discharges / Displaying a firearm Appearance Date next

Offense Discharges / Displaying a firearm

Court County Madison

Court City Canton Court State MS Div/Dept Judge

If rewrite, give orig power # ☐ Increase ☐ Decrease

Executing Agent: Sony Swastika Signature applicable, add your COURT assigned Agent's

✓✓ Tillman, Montreal

Judge: 3

Case No.(s):

Arraignment Date:

Bond:

Defendant:

Address:

SS # SL #

Phone #

Employer:

Phone # of Employer:

Supervisor: Verified:

Charges: Domestic Violence

Affiant: Estella Lee Date Subpoenaed:

Other Witnesses:

Bonding Companies: App. Date:

Hearing Date:

Continued to for

Continued to for

Continued to for

Attorney:

Notes:

EXHIBIT

YY

CASE NO MIS 00 020083

JUDGE CINDY B ALFORD

CHARGE DOMESTIC VIOLENCE

GENERAL AFFIDAVIT

THE STATE OF MISSISSIPPI

COUNTY OF MADISON

PERSONALLY APPEARED BEFORE ME Mary Lockett, DC

A JUSTICE COURT CLERK OF MADISON COUNTY,

1,000

LEE ESTELLA
707 MACE STREET A-14
CANTON MS 39046-0000

MAKES AFFIDAVIT THAT

TILLMAN MONTREAL
100 VIRGIN MARY ROAD
CAMDEN MS 39045-0000

ON OR ABOUT 12/14/2011 IN MADISON COUNTY, MISSISSIPPI

DID PURPOSELY, KNOWINGLY AND UNLAWFULLY COMMIT AN ACT OF DOMESTIC VIOLENCE IN THAT HE CAUSED BODILY INJURY TO AFFIANT BY HITTING HER WITH A FIST IN THE HEAD, FACE AND BACK. AFFIANT STATED THAT DEFENDANT TOOK NUDE PICTURES OF HER ON HIS PHONE AND SEND IT OUT TO OTHER PEOPLE. AFFIANT HAD THE FOLLOWING RELATIONSHIP TO DEFENDANT AT THE TIME OF THE ASSAULT: CURRENT DATE RELATIONSHIP. THIS OCCURRED IN MADISON COUNTY, MS.

AGAINST THE PEACE AND DIGNITY OF THE STATE OF MISSISSIPPI.

Estella Lee

SWORN TO AND SUBSCRIBED BEFORE ME THIS THE 12/15/2011

Mary Lockett D.C.
MADISON COUNTY JUSTICE COURT

2961 SOUTH LIBERTY, CANTON, MS 39046

IN THE JUSTICE COURT OF MADISON COUNTY, MISSISSIPPI

STATE OF MISSISSIPPI

CASE# MS000020083

VS

TILLMAN MONTREAL

CHARGE: DOMESTIC VIOLENCE

TO THE CLERK OF THE MADISON COUNTY JUSTICE COURT:

☒ ISSUE WARRANT AND INDICATE BOND ON SAME AS \$ 1,000

☐ WARRANT WILL NOT BE ISSUED

☐ SET FOR PROBABLE CAUSE HEARING

☐ FELONY CASE ONLY

☐ PROBABLE CAUSE EXISTS FOR ISSUANCE OF WARRANT

☐ LIST CHARGE IF DIFFERENT FROM ABOVE

SO ORDERED, THIS THE 19 DAY OF Dec, 11

SIGNATURE: Cindy Alford
JUDGE CINDY B ALFORD

RECUSE: _____

SO ORDERED, THIS THE _____ DAY OF _____

SIGNATURE: _____
JUDGE CINDY B ALFORD

MADISON COUNTY JUSTICE COURT

CASE RECORD OF STATE VERSUS TILLMAN MONTREAL

CASE: MIS00-20083 CHARGE DOMESTIC VIOLENCE

COURT DATE: 7/11/2012

TILLMAN MONTREAL
100 VIRGIN MARY ROAD
CAMDEN MS 39045-0000

AFFIANT/WITNESS: CONSTABLE MIKE BROWN

ATTORNEY FOR DEF: HON. GREGORY WEBER

BOND: JAIL RCPT#
APPEAL BOND:

=====

O R D E R

DEFENDANT IS FOUND: GUILTY PLEA

SENTENCE:

RELEASED TO TIME SERVED, INDIGENT.

DEFENDANT ORDERED TO HAVE NO UNINVITED CONTACT WITH AFFIAN/VICTIM, IN
ANY MANNER.

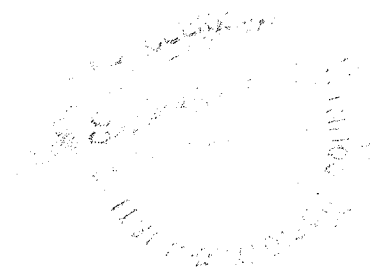
FINE \$ COSTS \$ 157.50 TOTAL \$ 157.50

SO ORDERED, THIS THE DAY OF

DOC. 2955 PAGE 138

BY: W. W. Starnes
JUSTICE COURT JUDGE

CASE: MIS00020083 VIOLATION DATE: DATE CLOSED: 7/11/2012



*** M A R 1 8 A M 1 1 ***

FILE

CLERK

3

THE STATE OF MISSISSIPPI

TO ANY LAWFUL OFFICER of Madison County: Greetings:

WE COMMAND YOU to take the body of:

TILLMAN MONTREAL

100 VIRGIN MARY ROAD

CAMDEN

MS 39045-0000

if to be found in your County, and have safely keep, so that you have his/her body before a Justice Court Judge of Madison County, in said state, to be holden at the office of the undersigned, in Madison County, 2561 S. Liberty Street, Canton, MS 39046, then and there to ANSWER unto the State of Mississippi on a charge of:

DOMESTIC VIOLENCE

HEREIN FAIL NOT, and have then there this writ, with the manner you have executed the same. Done under my hand and seal, and issued the 30th day of December, 2011.

Officer: CONSTABLE NIKIE BROWN

Served date: _____

Cindy Olfert

Madison County Justice Court Clerk/Judge

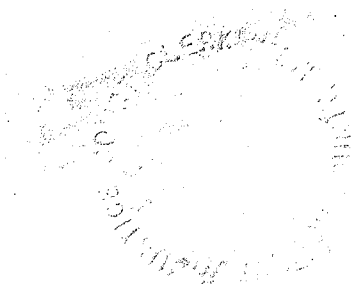
Bond Amount: 1000.00

By: Cheryl J. Horn, DC

D.C.

Vehicle: 00 Tag Not

DOB: Sex: M Race: BLN:



IN THE JUSTICE COURT OF MADISON COUNTY, MISSISSIPPI

STATE OF MISSISSIPPI

CASE# MIS000020083

VS

TILLMAN MONTREAL

CHARGE: DOMESTIC VIOLENCE

TO THE CLERK OF THE MADISON COUNTY JUSTICE COURT:

☒ ISSUE WARRANT AND INDICATE BOND ON SAME AS \$ 1,000

☐ WARRANT WILL NOT BE ISSUED

☐ SET FOR PROBABLE CAUSE HEARING

☐ FELONY CASE ONLY

☐ PROBABLE CAUSE EXISTS FOR ISSUANCE OF WARRANT

☐ LIST CHARGE IF DIFFERENT FROM ABOVE

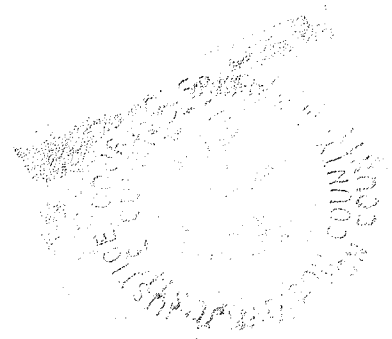
SO ORDERED, THIS THE 19 DAY OF Dec, 11

SIGNATURE: Cindy Alford
JUDGE CINDY B ALFORD

RECUSE: _____

SO ORDERED, THIS THE _____ DAY OF _____

SIGNATURE: _____
JUDGE CINDY B ALFORD



CASE NO MIS 00 020083

JUDGE CINDY B ALFORD

CHARGE DOMESTIC VIOLENCE

GENERAL AFFIDAVIT

THE STATE OF MISSISSIPPI

COUNTY OF MADISON

PERSONALLY APPEARED BEFORE ME Mary Lockett, DC

A JUSTICE COURT CLERK OF MADISON COUNTY,

LEE ESTELLA
707 MADE STREET A-14
CANTON MS 39046-0000

MAKES AFFIDAVIT THAT

TILLMAN MONTREAL
100 VIRGIN MARY ROAD
CAMDEN MS 39045-0000

ON OR ABOUT 12/14/2011 IN MADISON COUNTY, MISSISSIPPI

DID PURPOSELY, KNOWINGLY AND UNLAWFULLY COMMIT AN ACT OF DOMESTIC VIOLENCE IN THAT HE CAUSED BODILY INJURY TO AFFIANT BY HITTING HER WITH A FIST IN THE HEAD, FACE AND BACK. AFFIANT STATED THAT DEFENDANT TOOK NUDE PICTURES OF HER ON HIS PHONE AND SEND IT OUT TO OTHER PEOPLE. AFFIANT HAD THE FOLLOWING RELATIONSHIP TO DEFENDANT AT THE TIME OF THE ASSAULT: CURRENT DATE RELATIONSHIP. THIS OCCURRED IN MADISON COUNTY, MS.

AGAINST THE PEACE AND DIGNITY OF THE STATE OF MISSISSIPPI.

Estella Lee

SWORN TO AND SUBSCRIBED BEFORE ME, THIS THE 12/15/2011

Mary Lockett, DC
MADISON COUNTY JUSTICE COURT

2961 SOUTH LIBERTY, CANTON, MS 39046

FACT SHEET

YOUR NAME: Cecilia Lee
ADDRESS: 707 more st #14
Carton
PHONE(S): 601-253-2887
EMPLOYER: _____

THE PERSON I WANT TO FILE CHARGES AGAINST IS:

NAME: Montreal Tillman
ADDRESS: 100 Virgin Merry Road
Camden
PHONE: 601-253-6169
EMPLOYER: _____

THE DATE OF THE INCIDENT: Dec-14-2011
(describe what happened below)

he has put his hand on me, hit me
on my head with his fist in my face in my back
also take picture of my naked picture
of my on the phone send to people.
also call me out of my name
boyfriend date 8 months



FACT SHEET

PLEASE READ THE FOLLOWING
CAREFULLY

CRIMINAL AFFIDAVITS ARE FILED AGAINST PERSON(S) WHO HAVE BROKEN A STATE OR LOCAL LAW IN ACCORDANCE WITH THE MISSISSIPPI CODE OF 1972, ANN. AND COUNTY ORDINANCES.

AFTER COMPLETING THIS FACT SHEET, IF APPLICABLE, YOUR CRIMINAL AFFIDAVIT WILL BE PREPARED BY A CLERK. YOU WILL BE SWORN TO THIS AFFIDAVIT.

YOUR FILE WILL THEN BE GIVEN TO THE PROPER JUDGE.

THE JUDGE WILL THEN DECIDE TO ISSUE A WARRANT, SET FOR PROBABLE CAUSE, OR TAKE NO ACTION.

IF THE JUDGE ORDERS A PROBABLE CAUSE HEARING YOU WILL BE NOTIFIED TO APPEAR BEFORE THE JUDGE BEFORE WARRANT IS CONSIDERED.

IF A WARRANT IS ISSUED, IT WILL BE GIVEN TO THE PROPER LAW ENFORCEMENT OFFICER TO BE SERVED. ONCE THE DEFENDANT HAS BEEN ARRESTED, THE COURT WILL NOTIFY YOU AT THE ADDRESS GIVEN OF YOUR COURT DATE.

IT IS VERY IMPORTANT THAT YOU GIVE US YOUR CORRECT ADDRESS.

IT IS VERY IMPORTANT THAT YOU GIVE US ANY INFORMATION YOU HAVE REGARDING THE ADDRESS OF THE DEFENDANT. LACK OF THIS INFORMATION WILL SLOW DOWN THE SERVICE OF THE WARRANT.

CHARGES CANNOT BE DROPPED OUT OF COURT, AND YOU WILL BE RESPONSIBLE FOR ANY COSTS INCURRED TO DROP THE CHARGES WHEN APPEARING BEFORE THE JUDGE.

YOU CANNOT FILE CHARGES AGAINST SOMEONE BECAUSE THEY OWE YOU MONEY. YOU WILL NEED TO FILE A CIVIL SUIT TO ATTEMPT TO COLLECT MONEY.

I HAVE READ THE ABOVE, AND FULLY UNDERSTAND.

Castella Lee
(SIGN)

PLEASE FILL OUT THE REVERSE SIDE OF THIS SHEET.

MISSISSIPPI
JUL 11 2018
CLERK OF COURT
JUL 11 2018
CLERK OF COURT